

L08 000000 1333

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

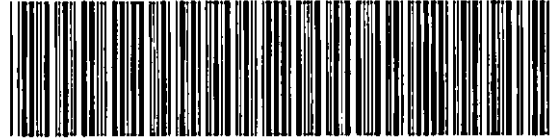
(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Bonnie G. Wirth, BSN, RN, LLC
(Name of Limited Liability Company)

The enclosed Articles of Dissolution and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Bernadette Behmke
(Name of Person)

Florida Dept. of Health
(Firm/Company)

Bureau of Emergency Medicine
(Address)

4042 Bald Cypress Way
(City/State and Zip Code)

Tallahassee, Florida 32311-7829

For further information concerning this matter, please call:

Bernadette Behmke
(Name of Person)

at (850) 284-4075
(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee and Certificate of Dissolution

☐ \$55.00 Filing Fee, Certificate of Dissolution &
Certified Copy (additional copy is enclosed)

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

**ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY**

1. The name of a limited liability company is

Bonnie G Wirth, BSN, RN, LLC

2. The Articles of Organization were filed on 1/23/2008 and assigned

document number L0800000 1333

3. The delayed effective date the dissolution if not effective on the date of filing: _____
(effective date cannot be prior to or more than 90 days later than date document is received for filing)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 605.0707, Florida Statutes, (copy 605.0707 on back cover letter).

I was 82 years old in August, 2021,
and decided it was time for me to
retire.

5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs: Earl Dennis Wirth

4519 Argyle Lane

Tallahussee, FL 32309

850-321-6407

6. Signature of an authorized person or if there are no members, the signature of the person appointed and listed above to wind up the company's activities and affairs:

Earl Dennis Wirth
Signature

Earl Dennis Wirth
Printed Name

FILING FEE: \$25.00