

#L08000036216

(Requestor's Name)

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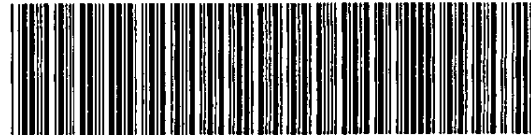
(Business Entity Name)

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02/17/11--01031--011 **11.25

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FILED
11 FEB 16 PM 4:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K. SALLY
EXAMINER
FEB 17 2011



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 2, 2011

DIGESTIVE AND LIVER DISEASES ASSOCIATES, P.L.
DAVID J VARGAS
1114 S. FLORIDA AVE.
LAKELAND, FL 33803

SUBJECT: DIGESTIVE AND LIVER DISEASES ASSOCIATES, P.L.
Ref. Number: L08000036216

We have received your document for DIGESTIVE AND LIVER DISEASES ASSOCIATES, P.L. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6870.

Karen A Saly
Regulatory Specialist II

Letter Number: 211A00002822

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Digestive AND Liver Diseases Associates, PL
(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:

DAVID J. VARGAS

(Name of Person)

(Firm/Company)

1114 S. FLORIDA AVE

(Address)

LAKELAND, FL 33803

(City/State and Zip Code)

For further information concerning this matter, please call:

DAVID J. VARGAS

(Name of Person)

at (863) 602-9224

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☐ \$25.00 Filing Fee

☐ 30.00 Filing Fee &
Certificate of Status

☒ \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

*Please send
Remaining Balance \$11.25*

MAILING ADDRESS:

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

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY

FILED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. The name of a limited liability company is

Digestive AND Liver Diseases Assocites, PL

2. The Articles of Organization were filed on 3/12/2008 and assigned document number

L08000036216

3. The date the dissolution was approved: 02-15-2011

4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 608.441, Florida Statutes, (copy 608.441 on back cover letter).

WRITTEN CONSENT OF ALL OF THE MEMBERS OF THE
LIMITED LIABILITY COMPANY

5. CHECK ONE:

☒ All debts, obligations and liabilities of the limited liability company have been paid or discharged.

-OR-

☐ Adequate provision has been made for the debts, obligations and liabilities pursuant to s. 608.4421.

6. All remaining property and assets have been distributed among its members in accordance with their respective rights and interests.

7. CHECK ONE:

☒ There are no suits pending against the company in any court.

-OR-

☐ Adequate provision has been made for the satisfaction of any judgment, order or decree which may be entered against it in any pending suit.

Signatures of the members having the same percentage of membership interests necessary to approve the dissolution:

Signature

Printed Name

① [Signature]

MAHAMUDUL HAQ

② [Signature]

DAVID S. VARGAS

Dissolution of Digestive and Liver Diseases Associates, P.L.

A meeting of the managing members of Digestive and Liver Diseases Associates, P.L. was held on 1/19/2011.

The managing members unanimously decided to dissolve the corporation at the earliest effective date. Necessary paper works will be initiated to carry out the process.



Mahmudul Haque



David J Vargas

Date: 1/19/2011