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PICK-UP WAIT MAIL				
(Business Entity Name)				
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S. HAWKES
FEB 0 6 2009
EXAMINER

COVER LETTER

TO:	Registration Section Division of Corporations	
SUBJE	TECT: Witkid Kuhd Medi (Name of Limited)	CAL BILLING & MANAGENEAT (Liability Company)
The end	nclosed Articles of Dissolution and fee(s) are submitted	for filing.
Please	e return all correspondence concerning this matter to the	following:
	GARY WITKIN	f Person)
	(Firm/C	ompany)
		TANHOPE PLACE
	UNIVERSITY PARI	
For fur	urther information concerning this matter, please call:	
	GARY WITTLIN (Name of Person)	at (941) 360-0493 (Area Code & Daytime Telephone Number)
_	sed is a check for the following amount: 5.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & \$60.00 Filing Fee. Certified Copy (additional copy is enclosed) \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
	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

1. The name of a limited liability company is	
WITHIN KUHN MEDICAL BIL	LING + MANAGEMENT GROUP, L.L.C
2. The Articles of Organization were filed on APRIL	and assigned document number
3. The date the dissolution was approved: FEB.	1 2009 . Eg 8 _
 A description of occurrence that resulted in the limited l 608.441, Florida Statutes, (copy 608.441 on back cover 	liability company's dissolution pursuant to section letter).
LACK OF SALES	
	<u> </u>
5. CHECK ONE:	
Adequate provision has been made for the debter. 6. All remaining property and assets have been distributed rights and interests. 7. CHECK ONE: There are no suits pending against the company OR-Adequate provision has been made for the satist entered against it in any pending suit.	in any court. faction of any judgment, order or decree which may be
Signatures of the members having the same percentage of me	mbership interests necessary to approve the dissolution:
Signature	Printed Name
Jan W. Will	GARY W. WITKIN
Bupul Vin	JOSEPH 1. Kuhn
··	

FILING FEE: \$25.00