

#L0800054557

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

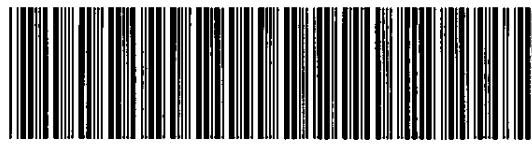
PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:



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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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2014 MAR -6 PM 5:12

Office Use Only

K. SALLY
EXAMINER
MAR - 7 2014



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 17, 2014

WILLIAM S RIZER
RE: MEDICAL ELECTRONIC DATA SYSTEMS, LLC
25328 CRESTWATER DR.
LEESBURG, FL 34748

SUBJECT: MEDICAL ELECTRONIC DATA SYSTEMS, LLC
Ref. Number: L08000054557

We have received your document for MEDICAL ELECTRONIC DATA SYSTEMS, LLC, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check or money order** made payable to the Department of State for \$25.00.

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) 245-6051.

Karen A Saly
Regulatory Specialist II

Letter Number: 714A00003527

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MEDICAL ELECTRONIC DATA SYSTEMS, 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:

WILLIAM S RIZER

(Name of Person)

MEDICAL ELECTRONIC DATA SYSTEMS LLC

(Firm/Company)

25328 CRESTWATER DRIVE

(Address)

LEESBURG, FL 34748

(City/State and Zip Code)

For further information concerning this matter, please call:

LOUISE CASTELLI at 941 **661-5079**

(Name of Person)

(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)

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

FILED

ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY

2014 MAR -6 PM 5:12

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. The name of a limited liability company is
MEDICAL ELECTRONIC DATA SYSTEMS, LLC

2. The Articles of Organization were filed on 06/03/2008 and assigned document number
L08000054557

3. The date the dissolution was approved: 11/01/2013

4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section
605 608.441, Florida Statutes, (copy 608.441 on back cover letter).

THE BUSINESS PURPOSE OF THE LLC IS COMPLETED. THE MEMBERS, WILLIAM S RIZER AND BRENDA L RIZER,
HAVE VOLUNTARILY AGREED TO DISSOLVE THE LLC.

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. 605 608.442.

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

William S Rizer
Brenda L Rizer

WILLIAM S RIZER

BRENDA L RIZER