L08000096/42

(Requestor's Name)						
(Address)						
(Address)						
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(co), consequence						
PICK-UP WAIT MAIL						
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(Document Number)						
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SECRETARY OF STATE FALL NHASSEE, FLORIDA

J. BRYAN

APR - 2 2009

EXAMINER

COVER LETTER

	on of Corporations				
SUBJECT: F	ohysicianEservices, LLC	;			
		imited Liability Company)			
The enclosed A	Articles of Dissolution and fee(s) are su	bmitted for filing.			
Please return a	Il correspondence concerning this matte	er to the following:			
	Robert E. Sutton				T E E
٠		(Name of Person)			製でア
Robert E. Sutton, M.D.					PR-1 PH 1:39
		(Firm/Company)			7.57
1561 Langham Terrace					39
		(Address)	1.0		
	Lake Mary, FL 32746				
	(Cit	y/State and Zip Code)			-
For further info	ormation concerning this matter, please	call:			
Robert E. Sutton		at (407	312-4	1816	
	(Name of Person)	(Area Code	& Daytime	Telephone Num	iber)
Enclosed is a che	eck for the following amount:				
\$25.00 Filing	Fee 30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is e	enclosed)	\$60.00 Fill Certificate of Certified Cop (additional c	Status &
MAILING ADDRESS:				RIER ADD	RESS:
	Registration Section Division of Corporations	Registration Section Division of Corporations			
P.O. Box 6327 Tallahassee, FL 32314		Clifton Building 2661 Executive Center Circle			
		2001 Executive Center Circle			C

Tallahassee, FL 32301

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1. The name of a limited liability company is	SHE PA
physicianEservices, LLC	70 =
2. The Articles of Organization were filed on Octobe L08000096142	er 10, 2008 and assigned document number
3. The date the dissolution was approved: December	er 31, 2009
4. A description of occurrence that resulted in the limite 608.441, Florida Statutes, (copy 608.441 on back cov	ed liability company's dissolution pursuant to section
Decided not to pursue business venture to du	ue lack of funding and difficult economic climate
5. CHECK ONE:	
All debts, obligations and liabilities of the lir	mited liability company have been paid or discharged.
OR-Adequate provision has been made for the de	ebts, obligations and liabilities pursuant to s. 608.4421.
6. All remaining property and assets have been distribut rights and interests.	ted among its members in accordance with their respective
7. CHECK ONE:	
There are no suits pending against the compa	any in any court.
OR- Adequate provision has been made for the sa entered against it in any pending suit.	ntisfaction of any judgment, order or decree which may be
ignatures of the members having the same percentage of r	nembership interests necessary to approve the dissolution
Signature	Printed Name
V XX X X	Robert E. Sutton

FILING FEE: \$25.00