

L08000099744

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

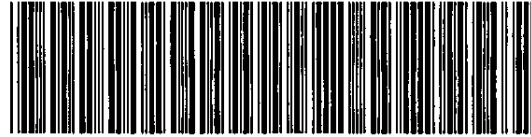
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2014 FEB 26 PM 5:28

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

1. The name of a limited liability company is  
Pulmonary & Sleep Clinic, P.L.
2. The Articles of Organization were filed on 10/22/2008 and assigned  
document number L08000099744
3. The delayed effective date the dissolution if not effective on the date of filing: \_\_\_\_\_
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).  
All the members have unanimously agreed in writing to dissolve the company.

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

Jack I. Obeid  
9013 University Pkwy., Suite H  
Pensacola, FL 32514

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:

Signature  


Printed Name

Jack I. Obeid

**FILING FEE: \$25.00**

2014 FEB 26 PM 5:28  
CLERK OF CIRCUIT  
JACKSONVILLE, FLORIDA

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