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To:

Division of Corporations

Fax Number :

: (850)617-6383

From:

Account Name : HOLLAND & KNIGHT Account Number : 072100000016

Phone : (813)227-8500 Fax Number : (813)229-0134

LLC DISSOLUTION OR WITHDRAWAL NATIONAL VEIN TECHNOLOGIES, LLC

Certificate of Status	1
Certified Copy	0
Page Count	02
Estimated Charge	\$30.00

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Electronic Filing Menu

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ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

	Signature		p	rinted Name	
		-	Dane A. Thomas		
5. list	Signature of an authorized poed above to wind up the com	erson or if there ar pany's activities a	e no members, the signal and affairs:	ure of the person appointed and	
		5513 W. Sligh	Avenue, Tampa Flor	lda 33634	
	It there are no members, end activities and affairs:	Dane A. Thom		inted to wind up the company's	
					· · · · · · · · · · · · · · · · · · ·
	·			SG -	AT S
•	The liquidation and diss	······································		ember.	FILE
(505.0707, Florida Statutes, (c	ору 605.0707 оп	back cover letter).	ry's dissolution pursuant to section	OD .
3.	The delayed effective date the defective of the delayed effective of th	ne dissolution if no date cannot be prior to	of effective on the date of our more than 90 days later th	filing: a date document is received for filing)	
	document number L09000	037459			
2.	The Acticles of Organization	i were filed on	04/17/2009	and assigned	
I,	The name of a fimited liabilinational Vein Technology		 "		

FILING FEE: \$25.00

Notice of Limited Liability Company Dissolution

NOTE: This page is optional

This notice is submitted by the dissolved limited liability company named below for resolution of payment of unknown claims against this limited liability company as provided in s. 605.0712, F.S.

This "Notice of Limited Liability Company Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Limited Liability Company: NATIONAL VEIN TECHNOLOGIES, LLC
Document number of Limited Liability Company is: L09000037459
Date of dissolution was:
Description of information that must be included in a written claim:
Name of claimants, date of claim, event giving rise to the claim, amount claimed, and
name, address and telephone number of contact to whom the company should
reply regarding the claim.
2 02 02 02 02 02 02 02 02 02 02 02 02 02
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)
Dane A. Thomas
5513 W. Sligh Avenue
Tampa Florida 33634
A claim against the above named limited liability company will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.
Dane A Thomas Manager

Fee: No charge if included with Articles of Dissolution. If filed separately \$25.00

Signature of the Person Filing

Printed Name of the Person Filing