

1090000 64851

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

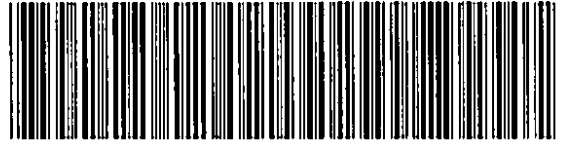
(Document Number)

Certified Copies _____ Certificates of Status _____

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Office Use Only

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04/24/20--01012--030 **25.00

2020 JUN -8 AM 11:37

C GOLDEN

JUN 10 2020

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Murbella Animal Hospital, 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:

Allen Suggs

(Name of Person)

(Firm/Company)

10175 Fortune Parkway Suite 601

(Address)

Jacksonville, Florida 32256

(City/State and Zip Code)

For further information concerning this matter, please call:

Sharon Santerre

904

363-0779

(Name of Person)

at (

_____) _____
(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee and Certificate of Dissolution

☐ \$55.00 Filing Fee, Certificate of Dissolution &
Certified Copy (additional copy is enclosed)

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

4/21/2020

To Whom it May Concern:

Please find enclosed a letter of Dissolution for Murbella Animal Hospital, LLC

If you have any questions, please call 904-363-0779

Please mail the Dissolution paperwork to

10175 Fortune Parkway Suite 601

Jacksonville, FL 32256

Thanking you in advance,

A handwritten signature in black ink, appearing to read 'AS', followed by a long, wavy horizontal line.

Allen Suggs



2020 JUN -8 PM 1:51

FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 8, 2020

ALLEN SUGGS
10175 FORTUNE PARKWAY
SUITE 601
JACKSONVILLE, FL 32256

SUBJECT: MURBELLA ANIMAL HOSPITAL, LLC
Ref. Number: L09000064851

We have received your document and check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

Please enter only one (1) name and address of the person appointed to wind up the company's activities and affairs.

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) 245-6050.

Claretha Golden
Regulatory Specialist II

Letter Number: 220A00009466

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

2010 - 8 11:37

1. The name of a limited liability company is
Murbella Animal Hospital, LLC

2. The Articles of Organization were filed on July 1, 2009 and assigned
document number L09000064851

3. The delayed effective date the dissolution if not effective on the date of filing: 1-25-20
(effective date cannot be prior to or more than 90 days later than date document is received for filing)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be
listed as the document's effective date on the Department of State's records.

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).

The Practice was sold, then the land & building was sold to Bell and Meyer, LLC

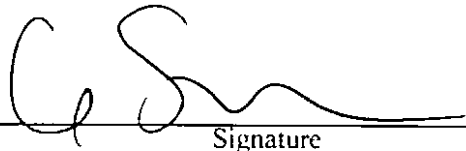
The Practice was sold, then the land & building was sold to Bell and Meyer, LLC

The Practice was sold, then the land & building was sold to Bell and Meyer, LLC

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

10175 Fortune Pkwy #601
Jax FL 32256

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

Allen Suggs

Printed Name

FILING FEE: \$25.00