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JAN 18 2011

EXAMINER

COVER LETTER

Registration Section Division of Corporations SUBJECT: E. JOHN SERRAO MD, FACOG, LLC (Name of Limited Liability Company)	
(Name of Emilion Diability Company)	
The enclosed Articles of Dissolution and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
NANCY BROWN	
(Name of Person)	
FWC MANAGEMENT COMPANY, LLC	
(Firm/Company)	
4205 W. ATLANTIC AVE., #C-304	
(Address)	- SSA
DELRAY BEACH, FL 33445	1 3 m
(City/State and Zip Code)	SE D
For further information concerning this matter, please call:	TE A
NANCY BROWN at (561) 300-2413	
(Name of Person) (Area Code & Daytime Telephone	Number)
Enclosed is a check for the following amount:	
	Filing Fee, te of Status &

(additional copy is enclosed)

MAILING ADDRESS:

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

STREET/COURIER ADDRESS:

Certified Copy

(additional copy is enclosed)

Registration Section **Division of Corporations** Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

E. JOHN SERRAO MD, FACOG,	LLC
2. The Articles of Organization were filed on L09000065374	/07/2009 and assigned document number
3. The date the dissolution was approved: 12/31	1/2010
4. A description of occurrence that resulted in the 608.441, Florida Statutes, (copy 608.441 on bac CLOSED BUSINESS.	limited liability company's dissolution pursuant to section ek cover letter).
5. CHECK ONE:	-
· — -OR-	the limited liability company have been paid or discharged. the debts, obligations and liabilities pursuant to s. 608.4421.
6. All remaining property and assets have been disrights and interests.	tributed among its members in accordance with their respective
7. CHECK ONE:	
There are no suits pending against the c OR- Adequate provision has been made for t entered against it in any pending suit.	company in any court. the satisfaction of any judgment, order or decree which may be
gnatures of the members having the same percentag	e of membership interests necessary to approve the dissolution:
Signature	Printed Name
Hunty hun U)	KENNETH KONSKER, MD
	ALS I
	AHA CREET AM
	SFR 2 7
	LEST TO

FILING FEE: \$25.00