

L09000066093

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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2011 FEB 25 PM 8:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

C. LEWIS

FEB 28 2011

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: In Home Physician Services, 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:

Chad Hall

(Name of Person)

In Home Physician Services, LLC

(Firm/Company)

1320 South Orlando Ave

(Address)

Winter Park, FL 32789 Suite 4

(City/State and Zip Code)

For further information concerning this matter, please call:

Matthew File

(Name of Person)

at (407) 741-3037

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:



\$25.00 Filing Fee



30.00 Filing Fee &
Certificate of Status



\$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)



\$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

MAILING ADDRESS:

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

STREET/COURIER ADDRESS:

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

ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY

FILED

2011 FEB 25 PM 2:17

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. The name of a limited liability company is
In Home Physician Services, LLC

2. The Articles of Organization were filed on 07-09-2009 and assigned document number
L09000066093

3. The date the dissolution was approved: December 31, 2010

4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section
608.441, Florida Statutes, (copy 608.441 on back cover letter).

business had no opportunity to grow with in reasonable time

5. CHECK ONE:

- ☒ All debts, obligations and liabilities of the limited liability company have been paid or discharged.
-OR-
☐ Adequate provision has been made for the debts, obligations and liabilities pursuant to s. 608.4421.

6. All remaining property and assets have been distributed among its members in accordance with their respective rights and interests.

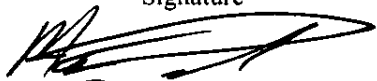
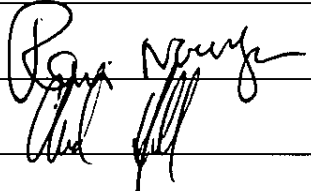
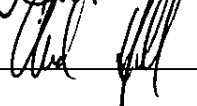
7. CHECK ONE:

- ☒ There are no suits pending against the company in any court.
-OR-
☐ Adequate provision has been made for the satisfaction of any judgment, order or decree which may be entered against it in any pending suit.

Signatures of the members having the same percentage of membership interests necessary to approve the dissolution:

Signature

Printed Name

MATTHEW FILE
RAVI NARASIMHAN
CHAD HAU