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EXAMINER

COVER LETTER

	of Corporations	•						
SUBJECT:	SANDERS	CENTER (Name of Lim	FDR nited Liabi	ORTHOPE DI	c €x	CELLE	NCE, LL	<u>.</u>
	icles of Dissolution and	fee(s) are subm	nitted for f	iling.				
Please return all	correspondence concern	ing this matter t		-				
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-		(F	irm/Compa	nny)			_	
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P.O. Box 6327

Tallahassee, FL 32314

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

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1. The name of a limited liability com	• •			
SANDER	S CENTER	FOR ORTHO	PEDIC EXCELLE	NCE LI
2. The Articles of Organization were fi \(\text{L 0 90 000 73 46} \)	,	/2009_a	nd assigned document	number
3. The date the dissolution was approve4. A description of occurrence that resu 608.441, Florida Statutes, (copy 608	ılted in the limited liabilit	y company's disso	lution pursuant to secti	on
member) of the	Impled 1.	MANAGIN ability a	member	(sole
5 CHECK ONE.			ZOIO / SEC TALL	manifunq.
5. CHECK ONE: All debts, obligations and lia OR- Adequate provision has been 6. All remaining property and assets ha rights and interests. 7. CHECK ONE:	n made for the debts, obli	gations and liabiliti	es pursuant to s. 608.4	4216
There are no suits pending a OR- Adequate provision has been entered against it in any pend	n made for the satisfaction	•	order or decree which	may be
ignatures of the members having the sam	e percentage of membersl	hip interests necess	ary to approve the diss	solution:
Signature		P	rinted Name	
	_	JASON	SANDERS	
	_			
	_			