

# L09000108974

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11 MAR 24 PM 12:01  
CLERK OF STATE  
TALLAHASSEE, FLORIDA

K. SALY  
EXAMINER  
MAR 28 2011

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Compassion Care for Pain & Injury, 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:

Sydel LeGrande, MD

(Name of Person)

Your Place Health Systems, LLC

(Firm/Company)

1405 Tampa Park Plaza

(Address)

Tampa, FL 33605

(City/State and Zip Code)

For further information concerning this matter, please call:

Sydel LeGrande, MD

(Name of Person)

at (813) 226-4264

(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  
11 MAR 24 PM 12:01  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

1. The name of a limited liability company is

Compassion Care for Pain + Injury, LLC

2. The Articles of Organization were filed on Nov. 9, 2009 and assigned document number

L09000108974

3. The date the dissolution was approved: 2/28/11

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).

No longer acting as a corporation.

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

Sydel LeGrande, MD  
George LeGrande

Sydel LeGrande, MD  
George LeGrande