

L 09000113306

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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EXAMINER



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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
12 APR - 5 PM 3:06

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DIVISION OF CORPORATIONS  
12 APR -5 PM 3:06

## ARTICLES OF DISSOLUTION

OF

### FIRST EMERGENCY REMOTE MEDICINE, LLC

First Emergency Remote Medicine, LLC, a Florida limited liability company, executes the following Articles of Dissolution under Section 608.441 of the Florida Limited Liability Company:

- FIRST: The name of the company is First Emergency Remote Medicine, LLC. The Articles of Organization were filed on November 25, 2009.
- SECOND: The document number of the Company is L09000113306.
- THIRD: The dissolution was approved unanimously on January 1, 2012, to be effective January 1, 2012.
- FOURTH: The Members voted to dissolve the Company, as provided by the Company's Operating Agreement.
- FIFTH: All debts, obligations, and liabilities of the Company have been paid or discharged.
- SIXTH: All remaining property and assets have been distributed among the Company's Members in accordance with their respective rights and interests.
- SEVENTH: There are no suits pending against the Company in any court.

EXECUTED: March 25, 2012

FIRST EMERGENCY REMOTE MEDICINE, LLC

By:   
Sean C. Orr, M.D., Managing Member

## NOTICE OF COMPANY DISSOLUTION

This notice is submitted by the dissolved company named below for resolution of payment of unknown claims against this company

Name of Company: FIRST EMERGENCY REMOTE MEDICINE, LLC

The date of dissolution will be the date of dissolution as filed by the Department of State or as specified in the Articles of Dissolution.

Description of information that must be included in a claim:

Name, address, account number, nature of claim, whether secured or unsecured, amount of claim in U. S. dollars, date of claim, whether claim has been assigned to third party collection entity, and name and contact information of authorized representative.

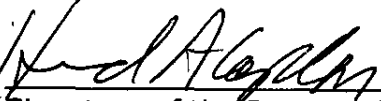
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

Howard A. Caplan, Esquire  
Lewis, Longman & Walker, P.A.  
245 Riverside Ave., Suite 150  
Jacksonville, FL 32202

A claim against the above named company will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

Howard A. Caplan

Printed Name of the Person Filing



Signature of the Person Filing