



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 8, 2016

600293089826

GENESYS DURABLE MEDICAL EQUIPMENT LLC
960 CESERY BOULEVARD
JACKSONVILLE, FL 32211-5608

SUBJECT: GENESYS DURABLE MEDICAL EQUIPMENT LLC
Ref. Number: L10000000928

Debit Memo #: 023252-D

Due to your failure to respond to our previous letter advising you of the attached returned check #627, the 2016 annual report has been cancelled and is considered not filed as of December 8, 2016. The entity has now been administratively dissolved/revoked and will have to reinstate and pay all fees due this office to return to active status.

Enclosed is the certificate of dissolution/revocation.

If you have any questions concerning the returned check, please call (850) 245-6887.

Sincerely
Garry Leonard
Administrative Assistant
Division of Corporations

Letter number: 116A00026111

State of Florida



Department of State

CERTIFICATE OF ADMINISTRATIVE DISSOLUTION OR REVOCATION

GENESYS DURABLE MEDICAL EQUIPMENT LLC having failed to file its 2016 annual report, in accordance with Florida Statutes, is hereby administratively dissolved or revoked on December 8, 2016.

The document number of this entity is L10000000928.



Given under my hand and the
Great Seal of the State of Florida
at Tallahassee, the Capital, this the
Eighth day of December, 2016



CR2EO22 (1-11)

Ken Detzner

Ken Detzner
Secretary of State



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 10, 2016

GENESYS DURABLE MEDICAL EQUIPMENT LLC
960 CESERY BOULEVARD
JACKSONVILLE, FL 32211-5608

SUBJECT: GENESYS DURABLE MEDICAL EQUIPMENT LLC
Ref. Number: L10000000928

Debit Memo #: 023252-D

This is to inform you that your check #627 dated September 15, 2016 in the amount of \$538.75 submitted with the annual report for GENESYS DURABLE MEDICAL EQUIPMENT LLC has been returned to us by your bank because of NON SUFFICIENT FUNDS.

As this payment cannot be replaced from our website and we cannot take credit card information over the phone, we request that you remit a cashier's check or money order in the amount of \$565.69 made payable to the Department of State. This amount will cover the unpaid check and the service fee required by law under section 215.34, Florida Statutes.

When sending the cashiers check or money order, please indicate the debit memo number and that it is a replacement for the returned check mentioned above.

Please note: This annual report will be cancelled and considered not filed unless a replacement check is received within 30 days from the date of this letter. If the annual report is cancelled for non-payment, the entity will be administratively dissolved for failure to file the annual report and pay the fees pursuant to Florida Statutes.

Send the replacement check to:

Division of Corporations
Attn: Garry Leonard
P.O. Box 6327
Tallahassee, FL 32314

If you have any questions concerning the returned check, please call (850) 245-6887.

Sincerely,
Garry Leonard

Administrative Assistant
Division of Corporations

Letter number: 516A00021727