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COVER LETTER

SUBJECT: D13Spd/E Sill HEALT) CALE 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: MALLIANTUNA LAD PENUMUD (Name of Person) Sol Tippelaly DP (Address) Mel Bourne FL - 32940 (City/State and Zip Code) For further information concerning this matter, please call: MALLIANTUNA RAD PENUMUD (Name of Person) (Area Code & Daytime Telephone Number) Enclosed is a check for the following amount: Solo Filing Fee & Certificate of Status Status Certificate of Status		ration Section on of Corporations	.1	
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MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Manual Code Person) (Name of Person) (Name of Person) (Name of Person) (Rame of Person) (Rame of Person) (Rame of Person) (Address) MELBOURNE FL = 32940 (Address) MALLING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 PENUMMOI (Address) Address) Address A	The enclosed A	rticles of Dissolution and fee(s)	are submitted for filing.	
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(Name of Person) Siring Fee	Please return at	i correspondence concerning thi	is matter to the following.	1
(Name of Person) Siring Fee				
For further information concerning this matter, please call: MALLIFAR JUNA RAD FRUMMU at (32) 960 · 862		MALLIKARJUNA		
MELBOURNE FL - 32940			(Name of Person)	
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MELBOURNE FL - 32940			(Firm Company)	,
MELBOURNE SL 32940. (City/State and Zip Code) For further information concerning this matter, please call: MALLIEAR JUNA RAO FNUMUO at (32) 960 862 (Area Code & Daytime Telephone Number) Enclosed is a check for the following amount: S25.00 Filing Fee Certificate of Status Certificate of Status MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 MAILING BOURNE SL STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building			(Fittib Company)	
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Division of Corporations P.O. Box 6327 Division of Corporations Clifton Building		MAILING ADDRESS:	STREET/COURIER ADDRI	ESS:
P.O. Box 6327 Clifton Building		Registration Section		
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Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301		rallanassee, FL 32314		

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY FILEU SECRETARY OF SIMIL OUTPORATION

10 DEC 30 AM 10: 52

		10 000 00	1
1. The name of a limited liability company is			
SIRI HEALTHCARE LL	C		!
	1		:]
2. The Articles of Organization were filed on	5/2010	i and assigned de	ocument number
L10000 107804 .			1
	1		,
3. The date the dissolution was approved: 12 27	2010	 •	
4. A description of occurrence that resulted in the limite 608.441, Florida Statutes, (copy 608.441 on back cov	d liability company er letter).	. (7 ,
I have Not None Any	Dusiness	on this	>121
HELTH CARE LLC, Will not	do any	Duriness on	this 12c.
Co dissolvino this	<u> </u>		
90 (11/8001077)			
			1
5. CHECK ONE:			ı
All debts, obligations and liabilities of the lin	nited liability comp	oany have been paid or	discharged.
OR- Adequate provision has been made for the de	hte obligatione an	d liabilities nursuant to	s 608 4421
 · · ·	_		1
 All remaining property and assets have been distribut rights and interests. 	ed among its memb	pers in accordance with	their respective
•			
7. CHECK ONE:			•
There are no suits pending against the compa	ny in any court.		0
Adequate provision has been made for the sa	tisfaction of any ju-	dgment, order or decre	e which may be
entered against it in any pending suit.			4
gnatures of the members having the same percentage of n	nembership interest	ts necessary to approve	the dissolution:
	•		ı
Signature	,	Printed Name	İ
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FILING FEE: \$25.00