· · · · · · · · · · · · · · · · · · ·	(Requestor's Name)	
	(Address)	
	(Address)	
	(City/State/Zip/Phone ≢	F)
PICK-UF	WAIT	MAIL
	(Business Entity Name)
	(Document Number)	
Certified Copies	Certificates o	f Status
Special Instructions	to Filing Officer:	

G. MCLEOD

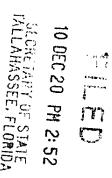
DEC 21 2010

EXAMINER



000188789590

12/20/10--01016--011 **25.00



COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: PATIENT FIRST HOME	CARE LLC
	imited Liability Company)
,	·
The enclosed Articles of Dissolution and fee(s) are su	bmitted for filing.
Please return all correspondence concerning this matter	er to the following:
Rohit J Vaid, JD	
· · · · · · · · · · · · · · · · · · ·	(Name of Person)
PATIENT FIRST HOM	ECARE LLC
	(Firm/Company)
6277 Powers Avenue	
	(Address)
Jacksonville Florida 32	
(Cit	y/State and Zip Code)
For further information concerning this matter, please	call:
Rohit J Vaid, JD	at (904) 7052752
(Name of Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
\$25.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & S60.00 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	STREET/COURIER ADDRESS: Registration Section
Division of Corporations	Division of Corporations
P.O. Box 6327 Tallahassee, FL 32314	Clifton Building 2661 Executive Center Circle

Tallahassee, FL 32301

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

2. The Articles of Organization were filed on 10/18	5/2010	and assigned document number
L10000108060		
3. The date the dissolution was approved: 12/15/2	2010	
4. A description of occurrence that resulted in the lim 608.441, Florida Statutes, (copy 608.441 on back of		's dissolution pursuant to section
Unintentional trademark infringement		HASA 2
		SE 0 1
		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
5. CHECK ONE:		
All debts, obligations and liabilities of the	limited liability comp	any have been paid or discharged.
OR-Adequate provision has been made for the	debts, obligations and	l liabilities pursuant to s. 608.4421.
	,	
 All remaining property and assets have been distributed rights and interests. 		•
6. All remaining property and assets have been distributing rights and interests.7. CHECK ONE:		•
rights and interests. 7. CHECK ONE:	outed among its memb	•
rights and interests.	puted among its memb	ers in accordance with their respectiv
rights and interests. 7. CHECK ONE: There are no suits pending against the component of t	npany in any court.	ers in accordance with their respectively
rights and interests. 7. CHECK ONE: There are no suits pending against the component of the component of the entered against it in any pending suit.	npany in any court.	ers in accordance with their respectively
rights and interests. 7. CHECK ONE: There are no suits pending against the component of the component of the entered against it in any pending suit.	npany in any court. satisfaction of any juc	dgment, order or decree which may be so necessary to approve the dissolution Printed Name
rights and interests. 7. CHECK ONE: There are no suits pending against the composition has been made for the entered against it in any pending suit. gnatures of the members having the same percentage of Signature	npany in any court. satisfaction of any juc	ers in accordance with their respectively designed accordance with the designed
rights and interests. 7. CHECK ONE: There are no suits pending against the composition has been made for the entered against it in any pending suit. gnatures of the members having the same percentage of Signature	npany in any court. satisfaction of any juc	dgment, order or decree which may be so necessary to approve the dissolution Printed Name
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FILING FEE: \$25.00