

41000007754

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Office Use Only



600312510976

05/02/18--01018--025 **25.00

05/02/18--01018--026 **30.00

FILED
2010 MAY 23 AM 5:26
FBI - ALABAMA
FBI - ALABAMA

MAY 24 2018
J. HARRIS

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: LAURENCE M. MATTHEWS MD 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:

LAURENCE MATTHEWS
(Name of Person)

(Firm/Company)

945 DEER HAMMOCK CIR.
(Address)

ST. AUGUSTINE, FL 32080
(City/State and Zip Code)

For further information concerning this matter, please call:

LAURENCE MATTHEWS at (904) 466-0345
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☐ \$25.00 Filing Fee and Certificate of Dissolution

☒ \$55.00 Filing Fee, Certificate of Dissolution &
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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 4, 2018

LAURENCE MATTHEWS
945 DEER HAMMOCK CIR
ST AUGUSTINE, FL 32080

SUBJECT: LAURENCE M. MATTHEWS, M.D., LLC
Ref. Number: L11000007754

We have received your document for LAURENCE M. MATTHEWS, M.D., LLC and your check(s) totaling \$55.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The Notice of Dissolution must contain a description of information that should be included in a written claim.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Jenna D Harris
Regulatory Specialist II

Letter Number: 318A00009278

RECEIVED
2018 MAY 23 AM 9:42
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FL

FILED
2018 MAY 23 AM 5:25
TALLAHASSEE, FL 32304

ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY

1. The name of a limited liability company is

LAURENCE M. MATTHEWS MD LLC

2. The Articles of Organization were filed on 01/19/2011 and assigned

document number L1100000 7754

3. The delayed effective date the dissolution if not effective on the date of filing: N/A
(effective date cannot be prior to or more than 90 days later than date document is received for filing)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 605.0707, Florida Statutes, (copy 605.0707 on back cover letter).

Business terminated

FILED

2011 MAY 23 AM 5:26
TALLAHASSEE FLORIDA

5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:

LAURENCE M. MATTHEWS

6. Signature of an authorized person or if there are no members, the signature of the person appointed and listed above to wind up the company's activities and affairs:

Laurence Matthews
Signature

LAURENCE MATTHEWS
Printed Name

FILING FEE: \$25.00