112000/5999

(Re	equestor's Name)	
(Ad	dress)	
(Ad	ldress)	***************************************
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
. (Bu	isiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
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COVER LETTER

TO:

Registration Section
Division of Corporations

SUBJECT: Choice Healthcare Management, 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:

Kenneth Nielson

(Name of Person)

Nielson Financial Services, Inc.

(Firm/Company)

901 East Washington St.

(Address)

Orlando, FL 32801

511a11d0, 1 E 32001

(City/State and Zip Code)

For further information concerning this matter, please call:

Cy Pizam

,407

454-9096

(Name of Person)

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

ρ \$25.00 Filing Fee

ρ \$30.00 Filing Fee & Certificate of Status ρ \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

ρ \$60.00 Filing Fee, Certificate of Status & 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

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

2. The Articles of Organization were filed on L12000065999	5/15/2012 and assigned document nu	mber
3. The date the dissolution was approved:	2/1/13	
4. A description of occurrence that resulted in 608.441, Florida Statutes, (copy 608.441 or	the limited liability company's dissolution pursuant to section	ı
Ceased operations on 2/1/2013		تئ
		1,000
		27
		70
5. CHECK ONE:		<u>123</u>
J. CHECK ONE.		
	s of the limited liability company have been paid or discharged	<u></u>
 All debts, obligations and liabilitie OR- 	s of the limited liability company have been paid or discharged for the debts, obligations and liabilities pursuant to s. 608.442	
 All debts, obligations and liabilitie OR- Adequate provision has been made 	14.	21.
■ All debts, obligations and liabilitie -OR- □ Adequate provision has been made 6. All remaining property and assets have bee	for the debts, obligations and liabilities pursuant to s. 608.442	21.
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