

L12000093550

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

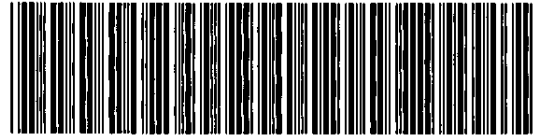
Special Instructions to Filing Officer:

A. LUNT

AUG 27 2011

EXAMINER

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA
2012 AUG 24 PM 9 19

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Direct Provider Services 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:

Jeri Dausey
(Name of Person)

South Beach Construction
(Firm/Company)

16499 NE 19th Avenue Ste 216
(Address)

North Miami Beach, FL 33162
(City/State and Zip Code)

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TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Alyse Wolfard at (305) 957-0088
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- \$25.00 Filing Fee
- \$30.00 Filing Fee & Certificate of Status
- \$55.00 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
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

2012 AUG 24 PM 4:19
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1. The name of a limited liability company is
Direct Provider Services, LLC

2. The Articles of Organization were filed on July 19, 2012 and assigned document number
L12000093550

3. The date the dissolution was approved: August 10, 2012

4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 608.441, Florida Statutes, (copy 608.441 on back cover letter).

As it is not otherwise provided in the articles of organization or operating agreement, all the members of the limited liability company give their written consent to dissolve Direct Provider Services, LLC

5. CHECK ONE:

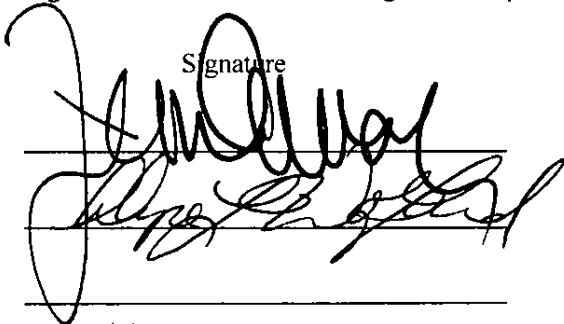
- All debts, obligations and liabilities of the limited liability company have been paid or discharged.
-OR-
 Adequate provision has been made for the debts, obligations and liabilities pursuant to s. 608.4421.

6. All remaining property and assets have been distributed among its members in accordance with their respective rights and interests.

7. CHECK ONE:

- There are no suits pending against the company in any court.
-OR-
 Adequate provision has been made for the satisfaction of any judgment, order or decree which may be entered against it in any pending suit.

Signatures of the members having the same percentage of membership interests necessary to approve the dissolution:

Signature


Printed Name

Jeri Dausey

Alyse L. Wolfard