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(Req	uestor's Name)	
(Add	ress)	
(Add	ress)	
(City	/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Business Entity Name)		
(Doc	ument Number)	
Certified Copies	Certificates	s of Status
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COVER LETTER

TO:

Registration Section
Division of Corporations

CELEBRATION SURGICAL MANAGEMENT ASSOCIATES, LLC

SUBJECT:

(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:

Laurie J. Levin, Esquire

(Name of Person)

Adventist Health System/Sunbelt, Inc.

(Firm/Company)

550 E. Rollins Street

6th Floor

Address)

Orlando, Florida 32803

(City/State and Zip Code)

For further information concerning this matter, please call:

Laurie J. Levin

_,407

303-8585

(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



February 5, 2016

LAURIE J LEVIN ADVENTIST HEALTH SYSTEM/SUNBELT INC 550 E ROLLINS STREET 6TH FLOOR ORLANDO, FL 32803

SUBJECT: CELEBRATION SURGICAL MANAGEMENT ASSOCIATES, LLC

Ref. Number: L13000033680

We have received your document for CELEBRATION SURGICAL MANAGEMENT ASSOCIATES, 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 effective date must be specific and cannot be prior to the date of filing.

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: 216A00002580

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1. The name of the limited liability company is CEL	EBRATION SURGICAL MANAGEMENT ASSOCIATES, LLC.
 The Articles of Organization were filed on Marc L13000033680. 	h 4, 2013 and assigned document number
3. The effective date of dissolution	<u>_</u> .
 A description of occurrence that resulted in the section 605.0707, Florida Statutes. 	he limited liability company's dissolution pursuant to
Unanimous consent by Managing Members to	dissolve the company.
5. Signature of an authorized person to wind up the	he company's activities and affairs:
Adventist Health System/Sunbelt, Inc., d/b/a Florida Hospital, Managing Member By: As its Dated: 13/7016	Badar Anwer, Managing Member Dated: 1/20/2016
James Atkins, Managing Member Dated: 1/14/16	Omar Fadhli, Managing Member Dated: 22/16
Andrew Hanzlik, Managing Member Dated:	Jerry Rubin, Managing Member Dated:
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