Division of Corporations Electronic Filing Cover Sheet

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(((H15000255794 3)))



please file LLC before LLC trajistration rigistration HISODO255195 Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone

: (850)205~8842

Fax Number

: (850)878-5368

LLC DISSOLUTION OR WITHDRAWAL CATARACT VISION INSTITUTE, LLC

Certificate of Status	0
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Electronic Filing Menu

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Help

K. SALY EXAMINER OCT 27 2015

COVER LETTER

TO:

Registration Section
Division of Corporations

SUBJECT: Cataract Vision Institute, 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:

(Name of Person)

The LASIK Vision Institute

(Firm/Company)

1555 Palm Beach Lakes Blvd., Suite 100

(Address)

West Palm Beach, FL 33401

(City/State and Zip Code)

For further information concerning this matter, please call:

Connie Shen

at (617 235-4764

(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 Taliahassee, FL 32314 STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

FILED
2015 OCT 26 AM 9: 10
SECRETARY OF STATE
FALLAHASSEE. FLORIDA

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1.	The name of a limited liabi Cataract Vision Institute, LLG	• • •		
2.	The Articles of Organization	on were filed on Ap	oril 24, 2013 and assigned	
	document number L130000	160523	•••	
3.	The delayed effective date the dissolution if not effective on the date of filing: (effective date example a 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 listed as the document's effective date on the Department of State's records.			
4.	A description of occurrenc 605.0707, Florida Statutes,	e that resulted in the (copy 605.0707 on	e limited liability company's dissolution pursuant to section back cover letter).	
	No langer doing business.			
5.	If there are no members, er activities and affairs:	iter the name and a	ddress of the person appointed to wind up the company's	
		1555 Palm Beach	Lakes Blvd., Suite100	
		West Palm Beach	, FL 33401	
6. lis	Signature of an authorized ted above to wind up the co	person or if there a mpany's activities	re no members, the signature of the person appointed and affairs:	
-	2	11	Ben Cook	
	Signature		Printed Name	

FILING FEE: \$25.00