

L14000033522

(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:

Office Use Only



000334745290

09/19/19--01023--006 \*\*50.00

19 SEP 19 PM 1:10

SEP 25 2019

M. SOLOMON

2019 SEP 24 PM 2:31

## CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301  
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

SEMINOLE PAIN CARE, LLC

Signature \_\_\_\_\_

Requested by: SETH

09/24/19

Name \_\_\_\_\_

Date \_\_\_\_\_

Time \_\_\_\_\_

Walk-In \_\_\_\_\_

Will Pick Up \_\_\_\_\_

\_\_\_\_ Art of Inc. File \_\_\_\_\_  
\_\_\_\_ LTD Partnership File \_\_\_\_\_  
\_\_\_\_ Foreign Corp. File \_\_\_\_\_  
\_\_\_\_ L.C. File \_\_\_\_\_  
\_\_\_\_ Fictitious Name File \_\_\_\_\_  
\_\_\_\_ Trade/Service Mark \_\_\_\_\_  
\_\_\_\_ Merger File \_\_\_\_\_  
\_\_\_\_ Art. of Amend. File \_\_\_\_\_  
\_\_\_\_ RA Resignation \_\_\_\_\_  
\_\_\_\_ Dissolution / Withdrawal \_\_\_\_\_  
\_\_\_\_ Annual Report / Reinstatement \_\_\_\_\_  
\_\_\_\_ Cert. Copy \_\_\_\_\_  
\_\_\_\_ Photo Copy \_\_\_\_\_  
\_\_\_\_ Certificate of Good Standing \_\_\_\_\_  
\_\_\_\_ Certificate of Status \_\_\_\_\_  
\_\_\_\_ Certificate of Fictitious Name \_\_\_\_\_  
\_\_\_\_ Corp Record Search \_\_\_\_\_  
\_\_\_\_ Officer Search \_\_\_\_\_  
\_\_\_\_ Fictitious Search \_\_\_\_\_  
\_\_\_\_ Fictitious Owner Search \_\_\_\_\_  
\_\_\_\_ Vehicle Search \_\_\_\_\_  
\_\_\_\_ Driving Record \_\_\_\_\_  
\_\_\_\_ UCC 1 or 3 File \_\_\_\_\_  
\_\_\_\_ UCC 11 Search \_\_\_\_\_  
\_\_\_\_ UCC 11 Retrieval \_\_\_\_\_  
\_\_\_\_ Courier \_\_\_\_\_



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

September 20, 2019

CAPITAL CONNECTION, INC.

SUBJECT: SEMINOLE PAIN CARE, LLC  
Ref. Number: L14000033522

We have received your document for SEMINOLE PAIN CARE, LLC and your check(s) totaling \$50.00. 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.

Karen A Saly  
Regulatory Specialist II

Letter Number: 019A00019502

2019 SEP 24 AM 10:52

## ARTICLES OF DISSOLUTION

Pursuant to §605.0707, Florida Statutes, this Florida limited liability company submits the following articles of dissolution:

Fist: The name of the limited liability company as currently filed with the Florida Department of State is:

**SEMINOLE PAIN CARE, LLC**

**Second:** The document number of the limited liability company:

**L14000033522**

Third: The date dissolution was authorized: September 24, 2019  
Effective date of dissolution: September 24, 2019

Fourth: These Articles of Dissolution and the dissolution of the Company were approved by the requisite number of members to approve such action as provided in §605.0701, Florida Statutes and such approval has been memorialized in the books and records of the Company.


**Fifth:** A Notice of Dissolution is attached to these Articles of Dissolution.

## “MEMBER”

## “MANAGER”

**JAMES MEDICAL SALES, LLC,**  
a Florida limited liability company

James M. O'Brien  
James M. O'Brien, its Manager

  
James J. O'Brien

**GEORGIA PAIN VENTURES, LLC,**  
a Florida limited liability company

**Sara A. Jones, its Manager**

**ROUNDTABLE MEDICAL, LLC,**  
a Florida limited liability company

  
Rick Stokvis, its Manager

[13132.0000002/2796352/1]

**ARTICLES OF DISSOLUTION  
SEMINOLE PAIN CARE, LLC**

Pursuant to §605.0707, Florida Statutes, this Florida limited liability company submits the following articles of dissolution:

First: The name of the limited liability company as currently filed with the Florida Department of State is:

**SEMINOLE PAIN CARE, LLC**

Second: The document number of the limited liability company:

**L14000033522**

Third: The date dissolution was authorized: September 24, 2019  
Effective date of dissolution: September 24, 2019

Fourth: These Articles of Dissolution and the dissolution of the Company were approved by the requisite number of members to approve such action as provided in §605.0701, Florida Statutes and such approval has been memorialized in the books and records of the Company.

Fifth: A Notice of Dissolution is attached to these Articles of Dissolution.

**"MEMBER"**

**"MANAGER"**

JAMES MEDICAL SALES, LLC,  
a Florida limited liability company

\_\_\_\_\_  
James J. O'Brien, its Manager

\_\_\_\_\_  
James J. O'Brien

GEORGIA PAIN VENTURES, LLC,  
a Florida limited liability company

Sara A. Jones  
Sara A. Jones, its Manager

ROUNDTABLE MEDICAL, LLC,  
a Florida limited liability company

\_\_\_\_\_  
Rick Stokvis, its Manager

**NOTICE OF LIMITED LIABILITY DISSOLUTION**  
**SEMINOLE PAIN CARE, LLC**

This notice is submitted by the dissolved limited liability company named below for resolution of payment of unknown claims against this limited liability company as provided in §605.0712, Florida Statutes.

First: The name of the dissolved limited liability company as it was filed with the Florida Department of State:

**SEMINOLE PAIN CARE, LLC**  
L14000033522

Second: The date of dissolution is that date set forth in those certain articles of dissolution filed with the Florida Department of State or, if none, the date of such filing.

Third: Any claim filed must include the following information:

- A. The name of claimant, date of claim, and name of officer, director, or employee of the dissolved limited liability company who authorized such claim; and
- B. Any notice to the dissolved limited liability company of the claim previously communicated or delivered to the limited liability company (before or after its dissolution).

Fourth: Any claim shall be mailed to:

**GOULD COOKSEY FENNELL**  
**Attn: SEMINOLE PAIN CARE, LLC - Creditor Claim**  
**979 Beachland Boulevard**  
**Vero Beach, FL 32963**

Fifth: A claim against the above named limited liability company will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

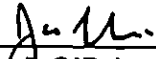
[Signature Page to Follow]

2019 SEP 24 PM 2:31

*[Signature Page - Notice of Limited Liability Company Dissolution]*

**"MEMBER"**

JAMES MEDICAL SALES, LLC,  
a Florida limited liability company

  
James J. O'Brien, its Manager

GEORGIA PAIN VENTURES, LLC,  
a Florida limited liability company

\_\_\_\_\_  
Sara A. Jones, its Manager

ROUNDTABLE MEDICAL, LLC,  
a Florida limited liability company

  
Rick Stokvis, its Manager

**"MANAGER"**

  
James J. O'Brien

2018 SEP 24 PM 2:31  
C:\Users\james\Documents\2018 SEP 24 PM 2:31

*[Signature Page - Notice of Limited Liability Company Dissolution]*

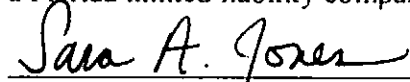
**"MEMBER"**

JAMES MEDICAL SALES, LLC,  
a Florida limited liability company

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James J. O'Brien, its Manager

GEORGIA PAIN VENTURES, LLC,  
a Florida limited liability company



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Sara A. Jones, its Manager

ROUNDTABLE MEDICAL, LLC,  
a Florida limited liability company

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Rick Stokvis, its Manager

**"MANAGER"**

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James J. O'Brien

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