

Division of Corporations Electronic Filing Cover Sheet

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Ta; Division of Corporations $\left(\right)$ Fax Number ; (850)617-6383 From: Account Name : BLALOCK, WALTERS, HELD & JOHNSON Account Number : 076666003611 Phone : (941)748-0100 : (941)745-2093 Fax Number

LLC DISSOLUTION OR WITHDRAWAL VITALS TELEHEALTH, LLC

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ARTICLES OF DISSOLUTION OF VITALS TELEHEALTH, LLC

BLALOCK WALTERS

In accordance with Florida Statutes Section 605.0707, VITALS TELEHEALTH, LLC. a Florida limited liability company, hereby adopts, delivers and files these Articles of Dissolution for the purpose of dissolving the company.

1. The name of the limited liability company is VITALS TELEHEALTH, LLC. (the "<u>Company</u>").

2. The Articles of Organization of the Company were filed on June 29, 2015, and assigned document number L15000111895 by the Florida Department of State.

3. Dissolution of the Company was authorized on March 25. 2016 by the written consent of a majority of the Members, an event that causes dissolution as provided for in Company's Operating Agreement.

4. The Members authorized and directed the undersigned party to file these Articles of Dissolution on behalf of the Company.

5. The dissolution of the Company shall be effective upon filing.

IN WITNESS WHEREOF, the undersigned has executed these Articles as of this 25th day of March, 2016.

VITALS TELEHEALTH, LLC, a Florida limited liability company

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BLALOCK WALTERS

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NOTICE OF LIMITED LIABILITY COMPANY DISSOLUTION

This notice is submitted by the dissolved limited liability company below for resolution of payment of unknown claims against this limited liability company as provided in s. 605.0712. F.S.

Name of Limited Liability Company:	VITALS TELEHEALTH, LLC
Document # of Limited Liability Company:	L15000111895

Date of dissolution was: • March 25, 2016

Description of information that must be included in a written claim:

The written claim must be reasonably specific as to the basis of the claim, and the amount of the claim, and should include any supporting information that would assist in evaluating the claim.

Mailing address where claims can be sent:

31/03 2016 15:22 FAX 9417452093

Blalock Walters, PA Attention: Robert Stroud 2 North Tamiami Trail. #408 Sarasota, FL 34236

A CLAIM AGAINST THE ABOVE NAMED LIMITED LIABILITY COMPANY WILL BE BARRED UNLESS A PROCEEDING TO ENFORCE A CLAIM IS COMMENCED WITHIN 4 YEARS AFTER THE FILING OF THIS NOTICE.

inś. Manager Ciprian Boldea

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