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(R	equestor's Name)
(A	ddress)
(A	ddress)
(C	city/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(B	Business Entity Name)
(C	Occument Number)
Certified Copies	Certificates of Status
Special Instructions to	o Filing Officer:
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Office Use Only



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D. BRUCE MAR 07 2017

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

•	The name of a limited liability company is Alliance Comprehensive Care, PLLC	
	The Articles of Organization were filed on 1/22/16 and assigned	
•	document number	
•	The delayed effective date the dissolution if not effective on the date of filing: (effective date cannot be 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 be listed as the document's effective date on the Department of State's records.	
	A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 05.0707, Florida Statutes, (copy 605.0707 on back cover letter).	
	On January 9, 2017, th LLC members voted to dissolve the entity effective immediately. All assets have been	
	listributed according to LLC operating agreement.	
	. =	
		!
	f there are no members, enter the name and address of the person appointed to wind up the company's	
l	ctivities and affairs: Compared to the control of the control o	
	ignature of an authorized person or if there are no members, the signature of the person appointed and d above to wind up the company's activities and affairs:	
	ANWAR A. KhAN MD PROSIC	len
•	// Signature Printed Name	

FILING FEE: \$25.00