

L16000128728

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

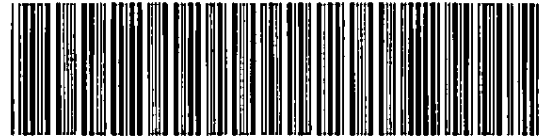
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2021 APR 13 AM 7:06
TALLAHASSEE, FL

D. BRUCE
JUN 11 2021

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Veterans HealthCare, 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:

Carlos Rivera

(Name of Person)

Vysnova Partners, Inc.

(Firm/Company)

8400 Corporate Drive Suite 130

(Address)

Landover MD 20785

(City/State and Zip Code)

For further information concerning this matter, please call:

Unyime Udofia

(Name of Person) at (_____) 301 830-8885 ext. 303
(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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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**ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY**

1. The name of a limited liability company is

Veterans HealthCare, LLC

2. The Articles of Organization were filed on July 7, 2016 and assigned

document number L16000128728

3. 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.

4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 605.0707, Florida Statutes, (copy 605.0707 on back cover letter).


The dissolution of Veterans HealthCare, LLC was due to the frustration of purpose for which the joint venture wa:

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5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs: Carlos Rivera: 8400 Corporate Drive Landover Maryland 20785

6. Signature of an authorized person or if there are no members, the signature of the person appointed and listed above to wind up the company's activities and affairs:



Carlos Rivera

Printed Name

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2021 APR 13 AM 7:06
STATE OF FLORIDA
CLERK OF THE COURT