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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

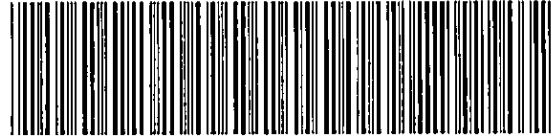
(Document Number)

Certified Copies _____ Certificates of Status _____

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Wellmerica, LLC

DOCUMENT NUMBER: L17000090499

The enclosed **Notice of Limited Liability Company Dissolution** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Timothy G. Schoenwalder

(Name of Contact Person)

Meenan P.A.

(Firm/Company)

300 South Duval Street, Suite 410

(Address)

Tallahassee, FL 32301

(City/State and Zip Code)

For further information concerning this matter, please call:

Timothy G. Schoenwalder

(Name of Contact Person)

at (850)
(Area Code)

425.4000

(Daytime Telephone Number)

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$30 Filing Fee &
Certificate of Status

☐ \$55 Filing Fee &
Certified Copy
(Additional copy is enclosed)

☐ \$60 Filing Fee,
Certificate of Status & 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

**ARTICLES OF DISSOLUTION FOR WELLMERICA, LLC
A LIMITED LIABILITY COMPANY**

Dated as of December 23, 2019

The name of the limited liability company is Wellmerica, LLC ("Wellmerica"). The enclosed Articles of Dissolution and \$25.00 filing fee are submitted for filing with Florida's Division of Corporations via hand delivery to the following address:

STREET/COURIER ADDRESS

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

Please return all correspondence concerning this matter to the following:

Timothy G. Schoenwalder, Esq.
Meenan, P.A.
300 South Duval, Suite 410
Tallahassee, Florida 32301

For further information concerning this matter please call:

Timothy G. Schoenwalder, Esq.
850.425.4000

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RECITALS

WHEREAS, Wellmerica is a Florida limited liability company formed on April 21, 2019 and assigned document number L17000090499 to (a) operate as a Florida Provider Service Network ("PSN") as that term is (i) defined by Section 409.912(2)(b) and 409.962(14) of the Florida Statutes, as amended from time to time; and (ii) interpreted and defined by the State of Florida Agency for Health Care Administration ("AHCA"); (b) engage in such other related business activities as may be approved by the Members or Managers, (as required) in accordance herewith, and (c) do all other lawful acts and things permitted or required by the terms of this Operating Agreement as the Members shall deem necessary or appropriate to carry out the foregoing purposes of the Company (collectively the "Business").

WHEREAS, this dissolution is to be effective December 23, 2019.

WHEREAS, the Wellmerica Board of Managers unanimously acknowledged in a signed written resolution dated December 18, 2019 that no business purpose exists for having Wellmerica continue its operations as a Florida limited liability company following Wellmerica's unsuccessful attempt to obtain from AHCA a Medicaid prepaid contract through the 2017/2018 Florida Medicaid Invitation to Negotiate process.

WHEREAS, Wellmerica's voting members unanimously acknowledged that no business purpose exists for having Wellmerica continue its operations as a Florida limited liability company following Wellmerica's unsuccessful attempt to obtain the Medicaid prepaid contract, and as such, Wellmerica's voting members unanimously provided signed written consent for Wellmerica to initiate dissolution.

WHEREAS, the Wellmerica Board of Managers (or the last remaining Member's successor in interest, if there are no remaining Managers of the Company) acknowledges that the Plan President is duly authorized by Wellmerica's voting members, the Wellmerica Board of Managers, and Wellmerica to execute and deliver in the name of and on behalf of the Wellmerica Board of Managers, Wellmerica members and Wellmerica these Articles of Dissolution of Wellmerica, LLC (the "Articles of Dissolution").

WHEREAS, the Wellmerica Board of Managers acknowledges that all known debts, obligations, and liabilities of Wellmerica have been paid or discharged, and there are no known suits or actions pending against Wellmerica in any court.

WHEREAS, the Wellmerica Board of Managers shall then immediately begin to wind up the affairs of Wellmerica pursuant to Article XIV of the Wellmerica, LLC Operating Agreement (the "Operating Agreement").

ACTIONS OF DISSOLUTION

ACCORDINGLY, Wellmerica is hereby:

DISSOLVED, effective this 23rd day of December 2019.

upon filing

THE ATTACHED NOTICE OF LIMITED LIABILITY COMPANY DISSOLUTION IS
HEREBY INCORPORATED AS PROVIDED IN SECTION 605.0712, FLORIDA STATUTES.

[the NOTICE OF LIMITED
LIABILITY COMPANY DISSOLUTION
is attached as pp. 3-4 of 4]

Notice of Limited Liability Company Dissolution

NOTE: This page is optional

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 s. 605.0712, F.S.

This "Notice of Limited Liability Company Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Limited Liability Company: Wellmerica, LLC

Document number of Limited Liability Company is: L17000090499

Date of dissolution was: _____

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

Identity and address of claimant

Basis for claim (contract, tort, other)

Date alleged claim arose

Amount sought by claimant

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

Wellmerica, LLC, to the attention of:

Timothy G. Schoenwalder, Esq.

Meenan P.A., 300 S. Duval Street, Suite 410

Tallahassee, FL 32301

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.

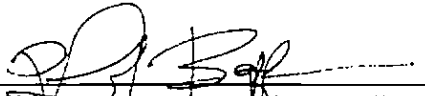
Timothy G. Schoenwalder, Esq.

Printed Name of the Person Filing


Signature of the Person Filing

Fee: No charge if included with Articles of Dissolution. If filed separately \$25.00

Dated: December 31, 2019


Philip Barr, Plan President, Wellmerica, LLC