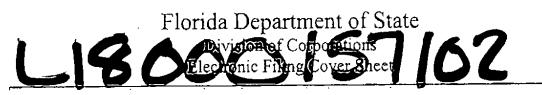
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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : BLALOCK, WALTERS, HELD & JOHNSON, P.A.

Account Number : 076666003611 : (941)748-0100

Fax Number ·: (941)745-2093

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## LLC DISSOLUTION OR WITHDRAWAL UP ANESTHESIA SERVICES, LLC

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JUN 29 2022

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## ARTICLES OF DISSOLUTION OF UP ANESTHESIA SERVICES, LLC

In accordance with Florida Statutes Section 605.0707, UP ANESTHESIA SERVICES, 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 UP ANESTHESIA SERVICES, LLC (the "Company").
- 2. The Articles of Organization of the Company were filed on June 27, 2018 and assigned document number L18000157102 by the Florida Department of State.
- 3. Dissolution of the Company was authorized: on October 1, 2021 by the written consent of the Members, an event that causes dissolution as provided for in section 605.0701, Florida Statutes.
- 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 October 1, 2021.

UP ANESTHESIA SERVICES, LLC, a Florida limited liability company

By:\_\_\_ Name:

Title:

Maraying Partin

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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:

UP ANESTHESIA SERVICES, LLC

Document # of Limited Liability Company: L18000157102

Date of dissolution was: October / 2021

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:

200 3<sup>rd</sup> Avenue West Suite 210 Bradenton, FL 34205

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.

UP ANESTHESIA SERVICES, a Florida limited liability company

By:

Bryan Allen, Manager