

49000126336

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

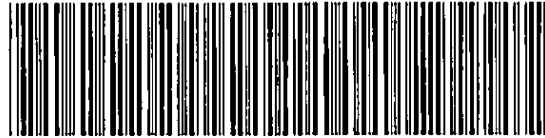
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600331099626

FILED

2019 JUL -1 A 2:30

TALLAHASSEE, FLORIDA

2019 JUL -1 PM 1:36

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D SCOTT
JUL 2 2019

FLORIDA FILING & SEARCH SERVICES, INC.

P.O. BOX 10662 TALLAHASSEE, FL 32302

155 Office Plaza Dr Ste A Tallahassee FL 32301

PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE: 7/1/19

NAME: MRS MEDICAL CENTER LLC

TYPE OF FILING: REVOCATION OF DISSOLUTION

COST: 100.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA000000015

AUTHORIZATION: ABBIE/PAUL HODGE


Abbie Hodge

FILED
2019 JUL - 1 A 2:30
TALLAHASSEE, FLORIDA

**STATEMENT OF REVOCATION OF DISSOLUTION
FOR
FLORIDA LIMITED LIABILITY COMPANY**

Pursuant to section 605.0708, Florida Statutes, this Florida limited liability company revokes its articles of dissolution prior to the expiration of 120 days following the effective date (or file date, if no effective date) of the articles of dissolution.

1. The name of the company is: MRS MEDICAL CENTER, LLC
2. The document number of the company is L19000126336
3. The effective date the Dissolution was filed is 05/30/2019
4. The revocation of dissolution was authorized on 06/26/2019
5. A copy of the Articles of Dissolution is attached.


Signature of person authorized to submit the revocation of dissolution

Filing Fee: \$100.00
Certified Copy: \$30.00 (optional)

FILED
May 30, 2019
Secretary of State

ARTICLES OF DISSOLUTION

Pursuant to section 605.0707, Florida Statutes, this Florida limited liability company submits the following Articles of Dissolution:

The name of the limited liability company as currently filed with the Florida Department of State:

MRS MEDICAL CENTER, LLC

The document number of the limited liability company: L19000126336

The file date of the articles of organization: May 9, 2019

A description of occurrence that resulted in the limited liability company's dissolution:

NOT IN USE

The name and address of the person appointed to wind up the company's activities and affairs:

MARK SHAYA
3100 N 34TH STREET
HOLLYWOOD, FL 33021 US

I/we submit this document and affirm that the facts stated herein are true. I/we am/are aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in section 817.155, Florida Statutes.

Signature: MARK SHAYA

Electronic Signature of authorized person

FILED
2019 JUL -1 A 2:30
TALLAHASSEE, FLORIDA