

L19000221660

(Requestor's Name)

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(Business Entity Name)

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Division of Corporations
TALLAHASSEE, FLORIDA



115 N CALHOUN ST., STE. 4
TALLAHASSEE, FL 32301
P: 866.625.0838
F: 866.625.0839
COGENCYGLOBAL.COM

Account#: 1200000000088

Date: 10/27/2021

Name: Eric Marciano

Reference #: 1504948

Entity Name: CANCER TREATMENT CENTERS OF AMERICA HOSPITALS AND CLINICS, LLC

☐ Articles of Incorporation/Authorization to Transact Business

☐ Amendment

☐ Change of Agent

☐ Reinstatement

☐ Conversion

☐ Merger

☒ Dissolution/Withdrawal

☐ Fictitious Name

☒ Other Please provide a certified copy upon filing.

Authorized Amount: \$55.00

Signature: Eric Marciano



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Signature: Eric Marciano

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Cancer Treatment Centers of America Hospitals and Clinics, 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:

Kirstin Elzer, Paralegal

(Name of Person)

c/o Katten Muchin Rosenman LLP

(Firm/Company)

525 W. Monroe Street, Suite 1300

(Address)

Chicago, IL 60661

(City/State and Zip Code)

For further information concerning this matter, please call:

Kirstin Elzer

(Name of Person)

312

577-8507

at (_____) _____

(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

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

1. The name of a limited liability company is

Cancer Treatment Centers of America Hospitals and Clinics, LLC

2. The Articles of Organization were filed on August 30, 2019 and assigned

document number L19000221660

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 limited liability company is no longer conducting business for which it was formed. Further,

more than 90 consecutive days have passed during which the limited liability company did not

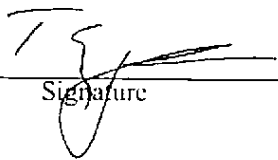
have any members.

5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs: c/o Timothy E. Flanigan

5901 Broken Sound Parkway NW, Suite 200

Boca Raton, FL 33487

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:


Signature

Timothy E. Flanigan

Printed Name

FILING FEE: \$25.00