

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H23000402432 3)))



H230004024323ABCU

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : GUNSTER, YOAKLEY & STEWART, P.A.

Account Number : 076117000420 Phone

: (561)650-0728

Fax Number

: (561)671-2527

## LLC DISSOLUTION OR WITHDRAWAL SENIOR SPECIALTY BENEFITS, LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

Ņ

Electronic Filing Menu

Corporate Filing Menu

Help

H23000402432

# ARTICLES OF DISSOLUTION FOR SENIOR SPECIALTY BENEFITS, LLC A FLORIDA LIMITED LIABILITY COMPANY

SENIOR SPECIALTY BENEFITS, LLC, a Florida limited liability company (the "Company"), hereby delivers these Articles of Dissolution pursuant to Section 605.0707 of the Florida Revised Limited Liability Company Act (the "Act") for the purpose of dissolving the Company.

- 1. The name of the Company is SENIOR SPECIALTY BENEFITS, LLC.
- 2. The Articles of Organization were filed on August 19, 2020, and assigned document number L20000242261.
- 3. The occurrence that resulted in the dissolution was the adoption of a resolution by the Board of Managers of the Company, as approved by the required members of the Company, in accordance with the First Amended and Restated Operating Agreement of the Company, as contemplated by Section 605.0701(1) of the Act.

#### SENIOR SPECIALTY BENEFITS, LLC

Louis E. Marinaccio, III	
Louis E. Marinaccio, III	
Manager	
11/20/2023	
	Louis E. Marinaccio, III Manager

H23000402432

H23000402432

### NOTICE OF LIMITED LIABILITY COMPANY DISSOLUTION

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 Section 605.0712, F.S.

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

- 1. Name of Limited Liability Company: SENIOR SPECIALTY BENEFITS, LLC.
- 2. Document number of Limited Liability Company is: L20000242261.
- 3. Effective date of dissolution is the date of filing with the Department of State.
- 4. Description of information that must be included in a claim: Name and address of claimant and description of the services/product provided, including date and amount of claim.
- 5. Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations):

SENIOR SPECIALTY BENEFITS, LLC Attention: Louis E. Marinaccio, III 20818 Parkstone Terrace Lakewood Ranch, FL 34202

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.

#### SENIOR SPECIALTY BENEFITS, LLC

By:	Louis E. Marinaccio, III
Name:	Louis E. Marinaccio, III
Title:	Manager
Date:	11/20/2023

ACTIVE:20559439.1