## 121000138839

| (Po                                     | questor's Name)   |           |
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| (Re                                     | questors Name)    |           |
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|   |                   |           |
| (Address)                               |                   |           |
|   |                   |           |
| (Cit                                    | y/State/Zip/Phone | #)        |
| PICK-UP                                 | WAIT              | MAIL      |
|   |                   |           |
| (Business Entity Name)                  |                   |           |
|   |                   |           |
| (Document Number)                       |                   |           |
|   |                   |           |
| Certified Copies Certificates of Status |                   | of Status |
|   |                   |           |
| Special Instructions to                 | Eiling Officer    |           |
| Special Instructions to Filing Officer: |                   |           |
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2022 FEB 24 PH 12: 54

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## **COVER LETTER**

TO: Amendment Section

Tallahassee, FL 32314

| Division of Corporations                                   |  |  |  |
|--|--|--|--|
| SUBJECT: Dissolution of Corporation a                      | that has not commenced business                    |  |  |
| DOCUMENT NUMBER: 1.2100013                                 | 88839  |  |  |
| The enclosed Articles of Dissolution                       | and fee are submitted for filing.                  |  |  |
| Please return all correspondence conc                      | cerning this matter to the following:              |  |  |
| Joseph Dryer DO  |  |  |  |
| (Nar   | me of Contact Person)                              |  |  |
| COMPASSIONATE CARE OF FLORIDA (                            |  | 2021 FEB 24  |  |
|  | (Firm/Company)                                     |  |  |
| 10406 Brentford Dr.  |  |  |  |
|  | (Address)  | 70 Tel.  |  |
| Tampa, FL, 33626   | , , , , , , , , , , , , , , , , , , ,              | PH 12: 5   |  |
| (Ci  | ty/State and Zip Code)                             | 131 - <del>F</del>                                 |  |
| For further information concerning th                      | is matter, please call:                            |  |  |
| Joseph Dryer   | at (386 ) 235-4079                                 |  |  |
| (Name of Contact Person)                                   | (Area Code & Daytime Teleph                        | one Number)  |  |
| Enclosed is a check for the following                      | amount:  |  |  |
| ■ \$35 Filing Fee □ \$43.75 Filing F<br>Certificate of Str |  | Status &<br>y                                      |  |
| Mailing Address:   | Street Address:                                    |  |  |
| Amendment Section  | Amendment Section                                  |  |  |
| Division of Corporations P.O. Box 6327                     | Division of Corporations The Centre of Tallahassee | Division of Corporations The Centre of Tallahassee |  |
|  | THE CENTE OF FAHANASSES                            |  |  |

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303



## FLORIDA DEPARTMENT OF STATE Division of Corporations

-RECEIVED

2022 FEB 24 AM 11: 21

SECRETARY OF STATE TALLAHASSEE, FL

February 8, 2022

JOSEPH DRYER DO COMPASSIONATE CARE OF FLORIDA CONSULTANT 10406 BRENTFORD DR TAMPA, FL 33626

SUBJECT: COMPASSIONATE CARE OF FLORIDA CONSULTANTS LLC

Ref. Number: L21000138839

We have received your document for COMPASSIONATE CARE OF FLORIDA CONSULTANTS LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a Corporation, but your entity is a Limited Liability Company. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Diane Cushing Senior Section Administrator

Letter Number: 922A00003097

## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

| 1. The name of a limited liability company is  |
|--|
| Compassionate Care of Florida Consultants LLC  |
| 2. The Articles of Organization were filed on $03/2.4/207.1$ and assigned  |
| document number <u>L Z   000138839</u>   |
| 3. The delayed effective date the dissolution if not effective on the date of filing: 12/31/2021  (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).  |
| I decided not to start a business with thes  |
| corporation therefore I wish to dissolve it & &  |
| 27 P   |
| No. of the control of |
|  |
| 5. If there are no members, enter the name and address of the person appointed to wind up the company's  |
| activities and affairs: (V. Joseph Orgen 1979)   |
| 10406 Brentford Dr   |
| Tampa FL 33626   |
|  |
| 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:   |
|  |
| Mary Doseph Dy   |
| Signature Printed Name FILING FEE: \$25.00   |
| // FILING FEE: 325.00  |