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To:

Division of Corporations  
Fax Number : (850)617-6383

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.  
Account Number : 110432003053  
Phone : (561)694-8107  
Fax Number : (561)214-8442

**LLC DISSOLUTION OR WITHDRAWAL  
MOBILE NUCLEAR MEDICINE OF WEST FLORIDA LLC**

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

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ALLIANCE FLORIDA

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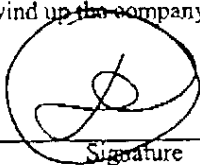
Corporate Filing Menu

Help

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T. LEMIEUX

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

1. The name of a limited liability company is  
MOBILE NUCLEAR MEDICINE OF WEST FLORIDA LLC
2. The Articles of Organization were filed on 02/16/2022 and assigned  
document number L22000093554
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).  
No longer doing business  
No longer doing business  
No longer doing business  
\_\_\_\_\_  
5. If there are no members, enter the name and address of the person appointed to wind up the company's  
activities and affairs: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
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

Danielle Gossman, Attorney-in-Fact  
\_\_\_\_\_  
Printed Name

**FILING FEE: \$25.00**

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