Laa000405531

(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:				
J. 1. J. HORNE MAŶ 2 5 2023				

Office Use Only



900408343449

7023 HAY 24 AH 10: 15

(_)

2023 MAY 24 PH 3: 3

TALLAN TOURDA

CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT	NO.	•	120000000195
	110.	•	120000001

REFERENCE: 768097 4300426

AUTHORIZATION :

COST LIMIT : \$ 55.00

ORDER DATE: May 24, 2023

ORDER TIME : 2:16 PM

ORDER NO. : 768097-015

CUSTOMER NO: 4300426

DOMESTIC FILINGS

NAME: ENCORE INFUSION MELBOURNE, LLC

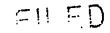
XX ARTICLES OF DISSOLUTION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY
PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Eyliena Baker - EXT#

EXAMINER'S INITIALS:



(3)

ARTICLES OF DISSOLUTION OF ENCORE INFUSION MELBOURNE, LLC

2023 HAY 24 AM 11: 15

SECRETARY OF STATE

Encore Infusion Melbourne. LLC, a limited liability company (the "Company"), organized and existing under and by virtue of the Florida Revised Limited Liability Company Act (the "Act"), does hereby submit for filing these Articles of Dissolution pursuant to Section 605.0707 of the Act and

DOES HEREBY CERTIFY THAT:

FIRST: The name of the Company is "Encore Infusion Melbourne, LLC".

SECOND: The Articles of Organization of the Company were filed on September 15, 2022

and assigned Document No. L22000405531.

THIRD: The dissolution of the Company was approved on May 8, 2023 and shall be

effective upon the filing of these Articles of Dissolution with the Florida

Department of State.

FIFTH: The Company was dissolved upon the written consent of the sole member of the

Company in accordance with the Company's operating agreement.

IN WITNESS WHEREOF, the undersigned has executed these Articles of Dissolution as of the 24th day of May, 2023.

ENCORF INFUSION MELBOURNE, LLC

By: _ Klieft Hogan _____

Title: Authorized Representative