

L99000005131

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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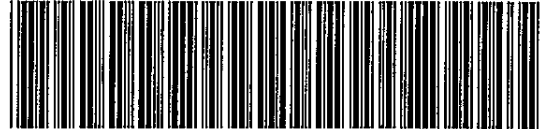
(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Infusion Partners, LLC d/b/a Moffitt Home Infusion Pharmacy Services
(Name of Limited Liability Company)

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Sharon Newton

(Name of Person)

ProHealth Medical, Inc.

(Firm/Company)

500 Winderely Place, Suite 224

(Address)

Maitland, FL 32751

(City/State and Zip Code)

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For further information concerning this matter, please call:

Sharon Newton

(Name of Person)

at (407) 660-1122

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &
Certificate of Status

☐ \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

1. The name of a limited liability company is
Infusion Partners, LLC

2. The Articles of Organization were filed on August 18, 1999 and assigned document number
L99000005131

3. The date the dissolution was approved: June 2, 2005

4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section
608.441, Florida Statutes, (copy 608.441 on back cover letter).

Unanimous agreement of Member Committee and termination of business activities in
accordance with paragraph 14.1 of the Regulations/Operating Agreement
effective August 17, 1999.

5. CHECK ONE:

- ☐ All debts, obligations and liabilities of the limited liability company have been paid or discharged.
-OR-
☒ Adequate provision has been made for the debts, obligations and liabilities pursuant to s. 608.441.

6. All remaining property and assets have been distributed among its members in accordance with their respective
rights and interests.

7. CHECK ONE:

- ☒ There are no suits pending against the company in any court.
-OR-
☐ Adequate provision has been made for the satisfaction of any judgment, order or decree which may be
entered against it in any pending suit.

Signatures of the members having the same percentage of membership interests necessary to approve the dissolution:

Signature

Braulio Vicent Jr.
Nancy Wells
Nicolas C. Porter
Elvin Montanez
H. Stephen Garner
Sharon Newton

Printed Name

BRAULIO VICENT JR.
NANCY WELLS
NICOLAS C. PORTER
ELVIN MONTANEZ
H. STEPHEN GARNER
SHARON NEWTON

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