

L99000005909

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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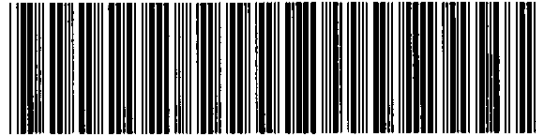
(Business Entity Name)

(Document Number)

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08 DEC 11 PM 12:55
TALLAHASSEE, FLORIDA
CLERK OF STATE

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DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
2008 DEC 11 AM 10:42
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B. KOHR

DEC 11 2008

EXAMINER



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 821535 7390554

AUTHORIZATION

COST LIMIT : \$25.00

FILED
08 DEC 11 PM 12:53
TALLAHASSEE, FLORIDA

ORDER DATE : December 10, 2008

ORDER TIME : 8:32 AM

ORDER NO. : 821535-060

CUSTOMER NO: 7390554

DOMESTIC FILINGS

NAME: PORT CHARLOTTE CARE, LLC

XX ARTICLES OF DISSOLUTION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Doreen Wallace - EXT# 2928

EXAMINER'S INITIALS: _____

ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY

FILED
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TALLAHASSEE, FLORIDA

1. The name of a limited liability company is

Port Charlotte Care, LLC

2. The Articles of Organization were filed on September 21, 1999 and assigned document number L99000005909.

3. The date the dissolution was approved: 01/01/2009.

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).

Sole managing member (Northern Health Facilities, Inc.) has directed the dissolution of this
limited liability company (see attached).

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. 608.4421.

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

Roch Carter

Printed Name

Roch Carter, Director and Vice President
of sole member

FILING FEE: \$25.00