## 1990000005912

(Requestor's Name)		
(Ac	ddress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phon	ne #)
PICK-UP	☐ WAIT	MAIL
(Business Entity Name)		
(Document Number)		
Certified Copies	Certificate	es of Status
Special Instructions to Filing Officer:		
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2008 DEC 11 AN IO: 4, TO ACCINOWLEDGE SUFFICIENCY OF FILLING

B. KOHR

DEC 1 1 2008

**EXAMINER** 



ACCOUNT NO. : 072100000032

REFERENCE : 821535 7390554

AUTHORIZATION

COST LIMIT

ORDER DATE: December 10, 2008

ORDER TIME: 8:29 AM

ORDER NO. : 821535-030

CUSTOMER NO: 7390554

## DOMESTIC FILINGS

NAME: JACKSONVILLE 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

The name of a limited liability company is  Jacksonville Care, LLC	
2. The Articles of Organization were filed on Septe L99000005912	ember 21, 1999 and assigned document number
3. The date the dissolution was approved;01/01/2009	ed liability company's dissolution pursuant to section
4. A description of occurrence that resulted in the limite 608.441, Florida Statutes, (copy 608.441 on back cov	ver letter).
Sole managing member (Northern Health Facilitie	es, Inc.) has directed the dissolution of this
limited liability company (see attached).	
5. CHECK ONE:	
	mited liability company have been paid or discharged.
-OR-	ebts, obligations and liabilities pursuant to s. 608,4421.
<del>_</del> · ·	ited among its members in accordance with their respective
7. CHECK ONE:	
x There are no suits pending against the compa	any in any court.
-OR- Adequate provision has been made for the sa entered against it in any pending suit.	atisfaction of any judgment, order or decree which may be
gnatures of the members having the same percentage of t	membership interests necessary to approve the dissolution;
Signature	Printed Name
(talle) latte	Roch Carter, Director and Vice President
•	of sole member

FILING FEE: \$25.00