

PG0000081232

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

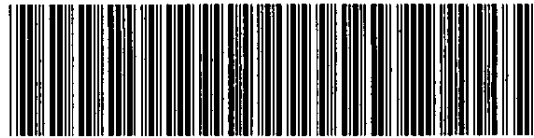
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000148519840

04/06/09--01026--011 **35.00

FILED
09 APR 15 PM 2:59
SECRETARY OF STATE
TALLAHASSEE FLORIDA

DISC
4/15/09
TL

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: LHS MANAGEMENT, INC.

DOCUMENT NUMBER: P06000081232

The enclosed Articles of Dissolution and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

KERRY ANNE SCHULTZ, ESQ.
(Name of Contact Person)

FOUNTAIN, SCHULTZ & ASSOCIATES, P.L.
(Firm/Company)

2045 FOUNTAIN PROFESSIONAL COURT SUITE A
(Address)

NAVARRE FL 32566
(City/State and Zip Code)

For further information concerning this matter, please call:

KERRY ANNE SCHULTZ, ESQ. at (850) 939-3535
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☒ \$35 Filing Fee ☐ \$43.75 Filing Fee & Certificate of Status ☐ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) ☐ \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)

MAILING ADDRESS:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 7, 2009

KERRY A SCHULTZ
2045 FOUNTAIN PROFESSIONAL CT STE A
NAVARRE, FL 32566

SUBJECT: LHS MANAGEMENT, INC.
Ref. Number: P06000081232

We have received your document for LHS MANAGEMENT, INC. and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must state the date the dissolution was authorized.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6927.

Tracy L Lemieux
Regulatory Specialist II

Letter Number: 409A00011674

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2009 APR 15 AM 8:00

RECEIVED

ARTICLES OF DISSOLUTION

Pursuant to section 607.1403, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

FIRST: The name of the corporation as currently filed with the Florida Department of State:

LHS MANAGEMENT, INC.

SECOND: The document number of the corporation (if known): P06000081232

THIRD: The date dissolution was authorized: 04/01/09

Effective date of dissolution if applicable:
(no more than 90 days after dissolution file date)

FOURTH: Adoption of Dissolution (CHECK ONE)

☒ Dissolution was approved by the shareholders. The number of votes cast for dissolution was sufficient for approval.

☐ Dissolution was approved by the shareholders through voting groups.

The following statement must be separately provided for each voting group entitled to vote separately on the plan to dissolve:

The number of votes cast for dissolution was sufficient for approval by

(voting group)

Signature: _____

(By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary)

Jay S. Patel

(Typed or printed name of person signing)

President

(Title of person signing)

FILED
09 APR 15 PM 2:59
SECRETARY OF STATE
TALLAHASSEE FLORIDA

Filing Fee: \$35