

POB 000112690

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

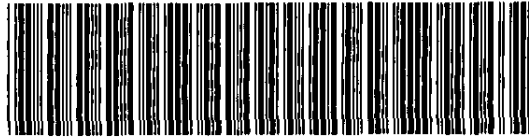
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000271698790

05/07/15--01022--010 **25.00

05/27/15--01026--009 **10.00

FILED

2015 MAY 29 AM 12:47

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JUN 01 2014

C. CARROTHERS



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 13, 2015

KERRY ANNE SCHULTZ
FOUNTAIN SHCULTZ & ASSOCIATES
2045 FOUNTAIN PROFESSIONAL CT STE A
NAVARRE, FL 32566

SUBJECT: LHS PENSACOLA #3, INC.
Ref. Number: P06000112690

We have received your document for LHS PENSACOLA #3, INC. and check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

There is a balance due of \$10.00. Refer to the attached fee schedule for a breakdown of the fees. Please return a copy of this letter to ensure your money is properly credited.

The attached form must be completed in order to file the document.

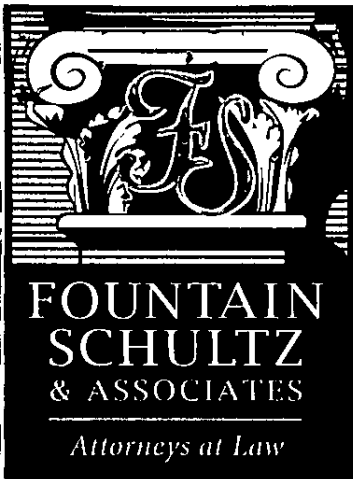
THE FORM YOU SUBMITTED IS FOR A LLC.

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) 245-6050.

Cathy A Carrothers
Regulatory Specialist

Letter Number: 615A00010000



May 26, 2015

VIA REGULAR US MAIL

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

KENNETH R. FOUNTAIN
KERRY ANNE SCHULTZ
SCOTT C. BRIDGFORD

RE: LHS Pensacola #3 Inc

Dear Sir or Madam:

The enclosed Articles of Dissolution are submitted for filing. Also enclosed is check #1416 in the amount of \$10.00 for the filing fee.

Please return in self-addressed stamped envelope that is provided.

Thank you for your consideration.

Sincerely,

FOUNTAIN, SCHULTZ & ASSOCIATES, PL


Kerry Anne Schultz, Esquire

KAS/cam
Enclosed as stated

2045 FOUNTAIN PROFESSIONAL CT.
SUITE A
NAVARRE, FLORIDA 32566
TEL: (850) 939-3535
FAX: (850) 939-3539
SANTA ROSA BEACH
TEL: (850) 622-2700
FAX: (850) 622-2722

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: LHS PENSACOLA #3, INC.

(Name of Limited Liability Company)

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

Please return all correspondence concerning this matter to the following:

KERRY ANNE SCHULTZ

(Name of Person)

FOUNTAIN, SCHULTZ & ASSOCIATES

(Firm/Company)

2045 FOUNTAIN PROFESSIONAL CT. SUITE A

(Address)

NAVARRE, FL 32566

(City/State and Zip Code)

For further information concerning this matter, please call:

KERRY ANNE SCHULTZ

(Name of Person)

850

at ()

939-3535

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

✓ \$25.00 Filing Fee and Certificate of Dissolution

— \$55.00 Filing Fee, Certificate of Dissolution &
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

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 PENSACOLA #3, INC.

SECOND: The document number of the corporation (if known): P06000112690

THIRD: The date dissolution was authorized: 05/04/15

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

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA