

5/25/2017

LOS000092307

Division of Corporations

12120026572 From: Kimberly Laughrey

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet.** Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H17000142687 3)))



H170001426873ABC3

**Note: DO NOT** hit the REFRESH/RELOAD button on your browser from this page.  
Doing so will generate another cover sheet.

To: Division of Corporations  
Fax Number : (850)617-6383

From: Account Name : C T CORPORATION SYSTEM  
Account Number : FCA000000023  
Phone : (512)418-6949  
Fax Number : (954)208-0845

LLC DISSOLUTION OR WITHDRAWAL  
COMMCARE PHARMACY - MIA, LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

2017 MAY 25 PM 12:32

TALLAHASSEE, FLORIDA

Electronic Filing Menu

Corporate Filing Menu

FILED  
17 MAY 25 AM 9:12  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

S Warren

MAY 26 2017

850-617-6381

5/25/2017 9:49:28 AM PAGE 1/001 Fax Server



May 25, 2017

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

COMM CARE PHARMACY - MIA, LLC  
C/O ANNA-MARIE FORREST  
13034 BALLANTYNE CORPORATE PLACE  
CHARLOTTE, NC 28277

SUBJECT: COMM CARE PHARMACY - MIA, LLC  
REF: L05000092307

We have received your electronically transmitted document. However, the document was submitted under the wrong electronic filing type and cannot be processed by this office.

To proceed, you must abandon this filing and resubmit your filing under the appropriate electronic filing type.

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) 245-6051.

Stacey M Warren  
Regulatory Specialist II

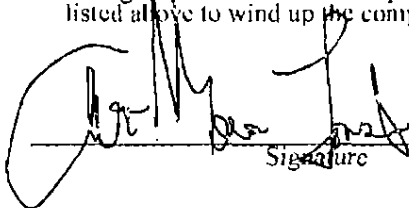
FAX Aud. #: H17000141493  
Letter Number: 717A00010554

2017 MAY 25 PM 12:32

OFFICE OF THE  
TALLAHASSEE, FLORIDA

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

1. The name of a limited liability company is  
COMMERCIAL PHARMACY - MIA, LLC
2. The Articles of Organization were filed on 09/19/2005 and assigned  
document number L05000092307
3. The delayed effective date the dissolution if not effective on the date of filing: \_\_\_\_\_  
(effective date cannot be prior to or more than 90 days later than date document is received for filing)  
**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
4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section  
605.0707, Florida Statutes, (copy 605.0707 on back cover letter).  
Limited Liability Company has dissolved and commenced its winding up activities  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
5. If there are no members, enter the name and address of the person appointed to wind up the company's  
activities and affairs: Anna-Marie Forrest  
13034 Ballantyne Corporate Place  
Charlotte, NC 28277  
\_\_\_\_\_
6. Signature of an authorized person or if there are no members, the signature of the person appointed and  
listed above to wind up the company's activities and affairs:

  
\_\_\_\_\_  
SignatureAnna-Marie Forrest

Printed Name

**FILING FEE: \$25.00**

FILED  
17 MAY 25 AM 9:12  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA