

L0500009884

(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:

A. LUNT

JUN 11 2009

EXAMINER

Office Use Only



200156249662

06/10/09--01036--002 **25.00

FILED
2009 JUN 10 PM 2:27
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SILICONE IMPLANTS FOR MEDICAL APPLIANCES
(Name of Limited Liability Company) SIMA LLC

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

Please return all correspondence concerning this matter to the following:

ERNESTO ANDRADE
(Name of Person)
SIMA LLC
(Firm/Company)
7951 NW 64th Street
(Address)
Miami Florida 33166
(City/State and Zip Code)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2009 JUN 10 PM 2:27

FILED

For further information concerning this matter, please call:

Ana Maria Rodriguez at (954) 593 0006
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☒ \$25.00 Filing Fee
☐ 30.00 Filing Fee & Certificate of Status
☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)
☐ \$60.00 Filing Fee, Certificate of Status & 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
FOR
A LIMITED LIABILITY COMPANY**

1. The name of a limited liability company is

SILICONE IMPLANTS FOR MEDICAL APPLIANCES

2. The Articles of Organization were filed on NOV, 14, 2005 and assigned document number

LO5000109884

3. The date the dissolution was approved: JAN 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).

No movements in USA

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

Printed Name

E. Andrade

ERNESTO ANDRADE

Carlota Andrade

CARLOTA ANDRADE E.

x Hector Jorge Otero P.

X-HECTOR JORGE OTERO P.

2009 JUN 10 PM 2:27
RECEIVED
CLERK OF STATE
TALLAHASSEE, FLORIDA

FILED