# L06000059255

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### COVER LETTER

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Registration Section
Division of Corporations

CR Miami Med, LLC

SUBJECT:

(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:

	Nicole Zuckerman-Morris		
	()	Name of Person)	
	Canyon Ranch		
	()	Firm/Company)	
	8600 E. Rockcliff Road		
		(Address)	
	Tucson, Arizona 85750		
	(City/	State and Zip Code)	
For further in	formation concerning this matter, please ca	a[]:	
Nic	cole Zuckerman-Morris	520 at (	749-9655 x. 4896
(Name of Person)			ode & Daytime Telephone Number)

#### **MAILING ADDRESS:**

\$25.00 Filing Fee and Certificate of Dissolution

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

▼ \$55.00 Filing Fee, Certificate of Dissolution & Certified Copy (additional copy is enclosed)

## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

FILED
2014 DEC -5 PM 3: 55

1.	The name of a limited liability company is	SEURETARY OF STATE TALLAHASSEE, FLOR <b>IDA</b>
	CR Miami Med, LLC	124.623 (130.042.1)
2.	The Articles of Organization were filed on June 9 document number L06000059255	9, 2006 and assigned
3.	The delayed effective date the dissolution if not effective date cannot be prior to or m	rective on the date of filing: N/A ore than 90 days later than date document is received for filing)
4.	605.0707, Florida Statutes, (copy 605.0707 on back	ited liability company's dissolution pursuant to section cover letter).
	Written consent of members.	
5.	If there are no members, enter the name and addres	s of the person appointed to wind up the company's
activities and affairs:		
6. lis	Signature of an authorized person or if there are no sted above to wind up the company's activities and a	members, the signature of the person appointed and ffairs:
	Hende Colen	Jerrold Cohen
1	/ Signature	Printed Name

FILING FEE: \$25.00