#2 10000119801

(Requestor's Name)					
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(Business Entity Name)					
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MI ANASSEL FI ORIDA

K. SALY EXAMINER FEB 7 2011

COVER LETTER

Registration Section Division of Corporations

TO:

SUBJECT: MIAMI CLINICAL RESEARCH INSTITUTE LLC
(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:
O. Deves
KAMON KEYES
(Name of Person)
(Firm/Company)
1021 0.1
3035 PAIM AVE
(Address)
HIALEAH, Pl. 33012
(City/State and Zip Code)
For further information concerning this matter, please call:
KAPION KEYES at (305) 822-0669
(Name of Person) at (305) 822-066-9 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$30.00 Filing Fee & \$55.00 Filing Fee & \$60.00 Filing Fee,
Certificate of Status Certified Copy Certificate of Status &
(additional copy is enclosed) Certified Copy (additional copy is enclosed)
MAILING ADDRESS: STREET/COURIER ADDRESS:
Registration Section Registration Section
Division of Corporations Division of Corporations
P.O. Box 6327 Clifton Building
Tallahassee, FL 32314 2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

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			SECRETARY OF STAT TALLAHASSEE, FLORID
1. The name of a limited liability company is MAMI CLINICAL R	RESEARCH 1	NStitute	LLC FLORID
	11/18/2010		document number
3. The date the dissolution was approved:	/31/2010		
4. A description of occurrence that resulted in the li 608.441, Florida Statutes, (copy 608.441 on back	, ,	/	
FOR SERVICES.	Not Abli	C TO O	PEN
FUL SUCULES.			
5. CHECK ONE:			•
All debts, obligations and liabilities of the OR- Adequate provision has been made for the			
6. All remaining property and assets have been distrights and interests.	_	-	
7. CHECK ONE:			
There are no suits pending against the co	mpany in any court.		
Adequate provision has been made for the entered against it in any pending suit.	e satisfaction of any judg	gment, order or dec	ree which may be
gnatures of the members having the same percentage	of mambarahin interests	nagaraani ta annua	
			ve the dissolution.
Signature	<i>P</i> .	Printed Name	Λ
M M	_CA	Rlos A.	UIAZ
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