

L11000098331

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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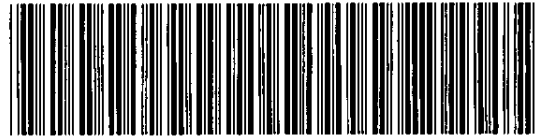
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JUL 09 2015
D. BRUCE

Holland & Knight

Requester's Name

315 South Calhoun Street, suite 600

Address

Tallahassee, FL 32301 (850)425-5686

City/State/Zip

Phone #

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. Biovance Therapeutics, LLC
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

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NEW FILINGS

- ☐ Profit
- ☐ Not for Profit
- ☐ Limited Liability
- ☐ Domestication
- ☐ Other

AMENDMENTS

- ☐ Amendment
- ☐ Resignation of R.A., Officer/Director
- ☐ Change of Registered Agent
- ☒ Dissolution/Withdrawal
- ☐ Merger

OTHER FILINGS

- ☐ Annual Report
- ☐ Fictitious Name

REGISTRATION/QUALIFICATION

- ☐ Foreign
- ☐ Limited Partnership
- ☐ Reinstatement
- ☐ Trademark
- ☐ Other

Examiner's Initials

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TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: BIOVANCE THERAPEUTICS, 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:

Eddie Williams, III

(Name of Person)

Holland & Knight LLP

(Firm/Company)

315 S. Calhoun Street, Suite 600

(Address)

Tallahassee, Florida 32301

(City/State and Zip Code)

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TALLAHASSEE, FLORIDA

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For further information concerning this matter, please call:

Eddie Williams

(Name of Person)

at (850) 425-5653

(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

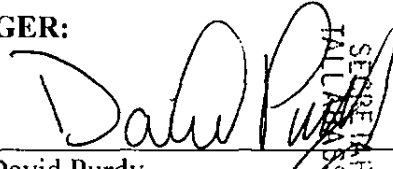
**ARTICLES OF DISSOLUTION
OF
BIOVANCE THERAPEUTICS LLC**

The undersigned, in his capacity as the sole Manager of BIOVANCE THERAPEUTICS LLC, a Florida limited liability company (the "Company"), desires to dissolve the Company, and in furtherance thereof, hereby certifies:

- FIRST: The name of the Company is BIOVANCE THERAPEUTICS LLC.
- SECOND: The Articles of Organization of the Company were filed on August 26, 2011 and assigned document number L11000098331.
- THIRD: The Company's dissolution pursuant to Section 605.0701 of the Florida Statutes has occurred as a result of the filing of a statement of administrative dissolution by the Florida Department of State on September 26, 2014.
- FOURTH: The Manager has authority to file these Articles of Dissolution in order to confirm and evidence the dissolution of the Company in accordance with such administrative dissolution and to wind down the affairs of the Company.
- FIFTH: All debts, obligations and/or liabilities of the Company have been paid or discharged.
- SIXTH: The Company has no properties and/or assets to be distributed, in accordance with its respective rights and interests.
- SEVENTH: There are no suits pending against the Company in any court.
- EIGHTH: Pursuant to Section 605.0707 of the Florida Statutes, the effective date of these Articles of Dissolution is the date of their filing with the Florida Department of State.

IN WITNESS WHEREOF, the undersigned has executed these Articles of Dissolution on this 6th day of July, 2015.

MANAGER:

By: 
Name: David Purdy
Title: Manager

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