## LIZOCOO 31CZC

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## **COVER LETTER**

TO:

FO: Registration Section Division of Corporations	
Advanced Breast Technologies	Consulting, LLC
	ted Liability Company)
The enclosed Articles of Dissolution and fee(s) are submi-	tted for filing.
Please return all correspondence concerning this matter to	the following:
Arthur	r G. Lerner, MD
(Na	me of Person)
Advanced Breast Technologies Cons	sulting, LLC
(Fir	mi/Company)
10428 SW Lands End PI	
	(Address)
Palm City, Florida, 34990	
(City/Si	ate and Zip Code)
For further information concerning this matter, please call	<b>I</b> :
Arthur G. Lerner, MD	at (727)597-0298
(Name of Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount.	
<b>X</b> l \$25.00 Filing Fee and Certificate of Dissolution	☐ \$55.00 Filing Fee, Certificate of Dissolution & Certified Copy (additional copy is enclosed)
Mailing Address:	Street Address:
Registration Section	Registration Section
Division of Corporations P.O. Box 6327	Division of Corporations The Centre of Tallahassee
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810
	Tallahassee, FL 32303

## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1.	The name of a limited liability con	npany is						
	Advanced	Breast Technolog	gies Consulting, LLC			<u> </u>		
2.	The Articles of Organization were	filed on	23/05/2012	and assigned	İ			
	document numberL1200	0031020						
3.	The delayed effective date the disc (effective date ca <u>Note:</u> If the date inserted in this blo listed as the document's effective da	nnot be prior to or me ck does not meet th	re than 90 days later than date e applicable statutory filing	document is recen	ved for file is date w	ing) ill not l	be	
4.	A description of occurrence that re 605.0707. Florida Statutes, (copy 6	esulted in the limi 05.0707 on back	ted liability company's d cover letter).	lissolution pursu	iant to s	ection		
	There has been no nev	w business in the	calendar year 2020. No	ew business w	as gene	rated	at	
	national medical meetings v		<u>'</u>	<u> </u>				
			ortant source of new bus	· · · · · · · · · · · · · · · · · · ·	<u> </u>		S time	
_		~ ~	bers of the LLG agree	<del></del> -				
5,	If there are no members, enter the	If there are no members, enter the name and address of the person appointed to wind up the company activities and affairs:  Arthur G. Lerner, MD  10428 SW Lands End Pl						
	activities and affairs:	Arthur (	3. Lerner, MD	<del></del>			<del></del>	
			V Lands End Pl Pity, FL. 3499			) I A	,	
					. :	₽		
	<del></del>	. , , , , , ,				<u>2</u> : 23		
	Signature of an authorized person ove to wind up the company's activ	or if there are no prities and affairs:	members, the signature o	If the person app	pointed a	md list	ted	
<b>&gt;</b>	who G. Lun-	i						
			Arthur G. I	Lerner, MD				
	Signature		Printe	d Name				

FILING FEE: \$25.00