

L12000131182

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

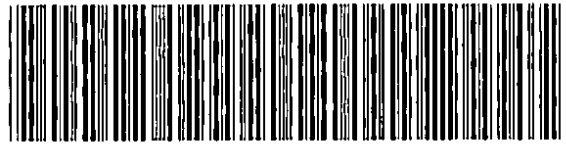
(Business Entity Name)

(Document Number)

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APR 30 2019

CORPORATION SERVICE COMPANY  
1201 Hays Street  
Tallahassee, FL 32301  
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 743815 4144A

AUTHORIZATION :

COST LIMIT : \$25.00

ORDER DATE : April 29, 2019

ORDER TIME : 3:23 PM

ORDER NO. : 743815-150

CUSTOMER NO: 4144A

DOMESTIC FILINGS

NAME: OPKO LAB, LLC

XX ARTICLES OF DISSOLUTION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

           CERTIFIED COPY  
XX            PLAIN STAMPED COPY  
           CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Roxanne Turner - EXT#

EXAMINER'S INITIALS: \_\_\_\_\_

APPROVED  
AND  
FILED

2019 APR 29 AM 9:23

CLERK OF THE  
SUPREME COURT  
TALLAHASSEE, FL 32301

**ARTICLES OF DISSOLUTION  
OF  
OPKO LAB, LLC**

The undersigned authorized person of OPKO LAB, LLC, a limited liability company organized and existing under the Revised Limited Liability Company Act of the State of Florida (the "Company"), hereby submits these following Articles of Dissolution to dissolve the Company, and in furtherance

HEREBY CERTIFIES:

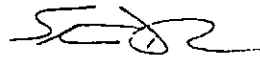
FIRST: The name of the limited liability company is OPKO LAB, LLC.

SECOND: The Articles of Organization were filed on October 15, 2012 and assigned document number L12000131186.

THIRD: The dissolution shall be effective with the Florida Secretary of State upon the filing of these Articles of Dissolution.

FOURTH: Pursuant to section 605.0707, Florida Statutes, the Company's dissolution is a result of no business activity.

IN WITNESS WHEREOF, the undersigned has executed these Articles of Dissolution on this 20<sup>th</sup> day of February, 2019.



\_\_\_\_\_  
Steven D. Rubin,  
Authorized Person

APPROVED  
AND  
FILED  
2019 APR 29 AM 9:23  
CLERK OF STATE  
TALLAHASSEE, FLORIDA

**NOTICE OF LIMITED LIABILITY COMPANY DISSOLUTION**  
**OF**  
**OPKO LAB, LLC**

This notice is submitted by the dissolved limited liability company named below for resolution of payment of unknown claims against this limited liability company as provided in Section 605.0712 of the Florida Statutes.

The name of the limited liability company is

The document number of limited liability company is:

The date of dissolution was February 20, 2019.

The following information must be included in a claim: the name of the claimant, the date of claim, the event giving rise to the claim, the amount claimed, and the name, address and telephone number of contact to whom the corporation should reply to regarding the claim.

Mailing address where claims can be sent to:

OPKO Lab, LLC  
4400 Biscayne Boulevard  
Miami, FL 33137

Note: Claims cannot be sent to the Florida Department of State Division of Corporations.

A claim against the above named limited liability company will be barred unless a proceeding to enforce the claim is commenced within four (4) years after the filing of this notice.

OPKO LAB, LLC

By:                     *SDR*                    

Name: Steven D. Rubin

Title: Vice-President

Date: February 20, 2019

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AND  
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