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SECONDIANA NECONIALA

TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section Division of Corporations Medical Advisory Services LLC The enclosed Articles of Dissolution and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Melissa Jacocks (Name of Person) (Firm/Company) 2608 NE 10th TERR. Wilton Manors, FL (City/State and Zip Code) For further information concerning this matter, please call: 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 FOR A LIMITED LIABILITY COMPANY

1.	The name of a limited liability company is Medica Advisory Services LLC	
2.	The Articles of Organization were filed on $6-20-2013$ and assigned	
	document number <u>L13000089576</u>	
3.	The delayed effective date the dissolution if not effective on the date of filing: 8/9/18 (effective date cannot be prior to or more than 90 days later than date document is received for filing) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will no listed as the document's effective date on the Department of State's records.	nt be
4.	A description of occurrence that resulted in the limited liability company's dissolution pursuant to secti 605.0707, Florida Statutes, (copy 605.0707 on back cover letter).	on
(on 9/22/2017 Medical Advisory Services LLC was admi	nistrativel
C	Issolved by the Bepartment of State Thefilings dated	2/15/18,
2	1/17/18, 7/16/18, and 7/24/18 are mistakes, at best, or are	fraudulen
T	he company ceased doing business in 2017	
5.	If there are no members, enter the name and address of the person appointed to wind up the company's	
	activities and affairs:	
		-
		<u> </u>
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		ω <u>F</u>
6. lis	Signature of an authorized person or if there are no members, the signature of the person appoint and sted above to wind up the company's activities and affairs:	D PN 6:52
(Jacocks Melissa Jacocks	
•	/ / Signature Printed Name	

FILING FEE: \$25.00