

L15000160954

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

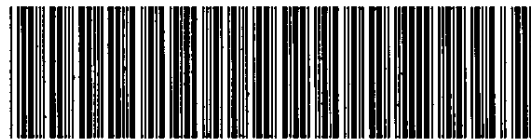
(Document Number)

Certified Copies \_\_\_\_\_

Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



000293874120

01/20/17--01018--017 \*\*25.00

FILED  
17 JAN 20 PM 2:57  
TALLAHASSEE, FLORIDA

JAN 23 2017

Y SULKER

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Excell Laboratory Services, 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:

Romy B. Jurado

(Name of Person)

Jurado & Farshchian, P.L.

(Firm/Company)

12955 Biscayne Boulevard, Suite 328

(Address)

North Miami, Florida 33181

(City/State and Zip Code)

For further information concerning this matter, please call:

Romy B. Jurado

(Name of Person)

at ( 305 ) 921-0440

(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  
FOR  
A LIMITED LIABILITY COMPANY**

1. The name of a limited liability company is  
Excell Laboratory Services, LLC
2. The Articles of Organization were filed on September 22, 2015 and assigned  
document number L15000160954
3. The delayed effective date the dissolution if not effective on the date of filing: December 1, 2016  
(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 not be  
listed as the document's effective date on the Department of State's records.
4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section  
605.0707, Florida Statutes, (copy 605.0707 on back cover letter).

The consent of All the Members

5. If there are no members, enter the name and address of the person appointed to wind up the company

activities and affairs:


Lisa Pacin - 10655 NE Quaybridge Court

Miami, FL 33138

Eric Marquez - 1601 N Palm Avenue, Suite 204

Pembroke Pines, FL 33026

6. Signature of an authorized person or if there are no members, the signature of the person appointed and  
listed above to wind up the company's activities and affairs:

  
Signature

Lisa Pacin



Printed Name

**FILING FEE: \$25.00**