

Florida Department of State  
Division of Corporations  
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**To:**

Division of Corporations  
Fax Number : (850)617-6383

**From:**

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.  
Account Number : I20000000019  
Phone : (305)552-5973  
Fax Number : (305)675-5944

**LLC DISSOLUTION OR WITHDRAWAL  
CUBA LIBRE MEDICAL CENTER LLC**

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OCT 27 2017

2017 OCT 26 PM 5:45  
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TALLAHASSEE, FLORIDA  
TALLAHASSEE, FLORIDA

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ARTICLES OF  
DISSOLUTION FOR  
A LIMITED LIABILITY COMPANY

1. The name of a limited liability company is

CUBA LIBRE Medical Center LLC

2. The Articles of Organization were filed on
- 09/01/2017
- and assigned

document number L1700018691

3. The delayed effective date the dissolution if not effective on the date of filing:
- 
- (effective date cannot be prior to or more than 90 days later than date document is received for filing)

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).

NOT ENOUGH BUSINESS

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

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:

  
SignatureCarlos A. Hurtado ID# 1010  
Printed Name

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