

12/29/21, 9:09 AM

Division of Corporations

L 18000130253

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H21000470968 3)))



H210004709683ABC4

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

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

From: Account Name : C T CORPORATION SYSTEM  
Account Number : FCA000000023  
Phone : (614)280-3338  
Fax Number : (954)208-0845

2021 DEC 29 AM 10: 17

FLORIDA  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS

LLC DISSOLUTION OR WITHDRAWAL  
IMA CLINICAL RESEARCH, LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

2021 DEC 29 AM 10: 14

FLORIDA  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS

Electronic Filing Menu

Corporate Filing Menu

Help

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1. The name of a limited liability company is IMA Clinical Research, LLC

2. The Articles of Organization were filed on 5/25/2018 and assigned document number L18000130253

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) 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 entity is no longer transacting business in the State of Florida.

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:

[Handwritten Signature]

David Pulver

Signature

Printed Name

FILING FEE: \$25.00

2021 DEC 29 AM 10:17 DEPARTMENT OF STATE DIVISION OF CORPORATE AFFAIRS