

**Florida Department of State**  
 Division of Corporations  
 Electronic Filing Cover Sheet

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

**From:** Account Name : ALEPH ENTERPRISES  
 Account Number : T28130000042  
 Phone : (561)789-6327  
 Fax Number : (561)431-0251

2020 DEC 30 AM 9:23  
 TALLAHASSEE, FL

**LLC DISSOLUTION OR WITHDRAWAL  
 KADIMA ADVANCED MEDICAL TECHNOLOGY, LLC**

Certificate of Status	1
Certified Copy	0
Page Count	02
Estimated Charge	\$30.00

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**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** KADIMA ADVANCED MEDICAL TECHNOLOGY, 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:

**ALEXANDRE B SILVA**

(Name of Person)

**ALEPH ENTERPRISES**

(Firm/Company)

**11576 TIMBERS WAY**

(Address)

**BOCA RATON, FL 33428**

(City/State and Zip Code)

For further information concerning this matter, please call:

**ALEXANDRE SILVA**

(Name of Person)

at ( **561** ) **789-6327**

(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

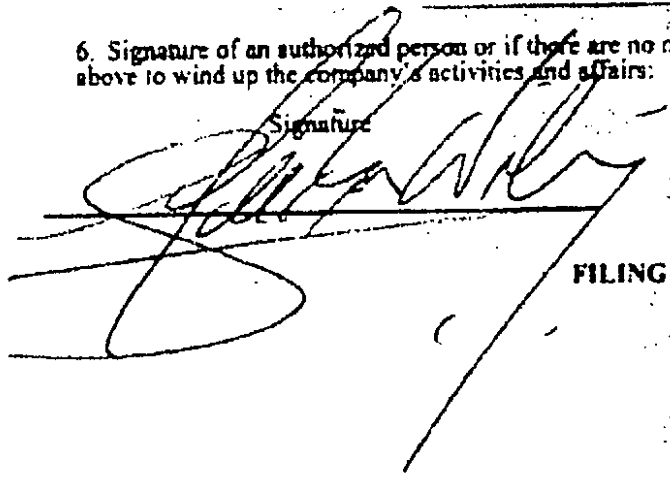
ARTICLES OF DISSOLUTION  
FOR  
A LIMITED LIABILITY COMPANY

2020 DEC 30 AM 9:23  
TALLAHASSEE, FL

- 1. The name of a limited liability company is KADIMA ADVANCED MEDICAL TECHNOLOGY, LLC
- 2. The Articles of Organization were filed on 02/18/2020 and assigned document number L20000049060
- 3. The delayed effective date the dissolution if not effective on the date of filing: 12/30/2020
- 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).  
GOING OUT OF 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:  
ALEXANDRE SILVA  
11576 TIMBERS WAY  
BOCA RATON, FL 33428

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  


Printed Name  
WILIAM GLEICHER

FILING FEE: \$25.00