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(Re	questor's Name)			
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(Cit	y/State/Zip/Phone	e #)		
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I ALBRITTON

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 287,046 / 7377924

AUTHORIZATION :

COST LIMIT : \$ 25.00

ORDER DATE : December 7, 2021

ORDER TIME : 10:03 AM

ORDER NO. : 287046-010

CUSTOMER NO: 7377924

DOMESTIC FILINGS

NAME: LFB AMERICAN PLASMA LLC

XX ARTICLES OF DISSOLUTION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

XX PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Eyliena Baker - EXT#

EXAMINER'S INITIALS:

COVER LETTER

Registration Section Division of Corporations

TO:

UBJECT:	FB AMERICAN PLASMA, LLC		
	(Name of Limi	ted Liability Compa	my)
ne enclosed /	Articles of Dissolution and fee(s) are submi	tted for filing.	
ease return a	Il correspondence concerning this matter to	the following:	
	Yasmin Bhumgara		
	(Na	me of Person)	
	LFB American Plasma, LLC		
	(Fir	m/Company)	
	2200 NW Corporate Blvd., Suite 210		
		(Address)	
	Boca Raton, FL 33431		
	(City/St	ate and Zip Code)	
r further info	ormation concerning this matter, please call	:	
Yasn	nin Bhumgara	508 at (370-5102
	(Name of Person)		ode & Daytime Telephone Number)
closed is a che	eck for the following amount:		
☐ \$25.00 Filing Fee and Certificate of Dissolution			Fee, Certificate of Dissolution & Copy (additional copy is enclosed)
	ng Address:	Street Address	
Registration Section Division of Corporations		Registration	
P.O. Box 6327		Division of Corporations The Centre of Tallahassee	
Tallahassee, FL 32314			nroe Street, Suite 810
		Tallahassee, FL 32303	

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

I.	The name of a limited liabil	• •	 -		
2.	The Articles of Organizatio	n were filed on 05/25/2021 and assigned			
	document number L210002	44637			
3.	(effective Note: If the date inserted in t	the dissolution if not effective on the date of filing: we date cannot be prior to or more than 90 days later than date document is received for filing) this block does not meet the applicable statutory filing requirements, this date will not be ective date on the Department of State's records.			
4.	A description of occurrence 605.0707, Florida Statutes. (that resulted in the limited liability company's dissolution pursuant to copy 605.0707 on back cover letter).	Section Section		
	Entity was Incorrectly regist	ered.	(,~) \		
	Entity was Incorrectly registe				
	Entity was Incorrectly registe	reu.	— ţ		
5.	If there are no members, entactivities and affairs:	ter the name and address of the person appointed to wind up the compa Jose A. Moreno Toscano	iny's		
		2200 NW Corporate Blvd., Suite 210			
		Boca Raton, FL 33431			
6. ab	Signature of an authorized pove to wind up the company	person or if there are no members, the signature of the person appointed is activities and affairs:	and listed		
		Nathan Boulanger			
	Signature	Printed Name			

FILING FEE: \$25.00