

Florida Department of State

Division of Corporations
Electronic Filing Cover Sheet**L22000037581**

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.

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To:

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

From:

Account Name : PAGIO'S & ASSOCIATES, LLC
Account Number : I20100000043
Phone : (305)397-8553
Fax Number : (305)397-8521

LLC DISSOLUTION OR WITHDRAWAL
MIA MEDICAL RESEARCH, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

2023 APR 20 AM 10:23

APR 20 2023
FILED

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MIA MEDICAL RESEARCH, 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:

YUDITH LOPEZ

(Name of Person)

MIA MEDICAL RESEARCH, LLC

(Firm/Company)

11825 SW 125TH CT

(Address)

MIAMI, FL 33186

(City/State and Zip Code)

For further information concerning this matter, please call:

YUDITH LOPEZ

(Name of Person)

786

626-5962

at (

_____)_____
(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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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**ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY**

1. The name of a limited liability company is

MIA MEDICAL RESEARCH, LLC

2. The Articles of Organization were filed on 02/02/2022 and assigned

document number L22000037581

3. The delayed effective date the dissolution if not effective on the date of filing: 04/18/2023
(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).

COMPANY NEVER STARTED 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:

Yudith Lopez
Yudith Lopez Apr 18, 2023 5:17 EDT

Signature

YUDITH LOPEZ

Printed Name

FILING FEE: \$25.00

2023 APR 20 AM 10:23
FILED

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Notice of Limited Liability Company Dissolution

NOTE: This page is optional

This notice is submitted by the dissolved limited liability company named below for resolution of payment of unknown claims against this limited liability company as provided in s. 605.0712, F.S.

This "Notice of Limited Liability Company Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Limited Liability Company: MLA MEDICAL RESEARCH, LLC

Document number of Limited Liability Company is: L22000037581

Date of dissolution was: 04/18/2023

Description of information that must be included in a written claim:

DETAILED INFORMATION ABOUT THE EVENTS THAT LEAD TO THE CLAIM. INCLUDE PERSONAL


INFORMATION FOR CONTACT INFO AS NAME, ADDRESS, PHONE AND EMAIL ADDRESS.

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

11825 SW 125TH CT
MIAMI, FL 33186

A claim against the above named limited liability company will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

YUDITH LOPEZ
Printed Name of the Person Filing


Signature of the Person Filing

Fee: No charge if included with Articles of Dissolution. If filed separately \$25.00