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To:

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

From:

Account Name : GUNSTER, YOKLEY & STEWART, P.A.
Account Number : 076117000420
Phone : (561)650-0728
Fax Number : (561)671-2527

**LLC DISSOLUTION OR WITHDRAWAL
NEXT GEN DIAGNOSTICS, LLC**

Certificate of Status	0
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**ARTICLES OF DISSOLUTION
FOR A
FLORIDA LIMITED LIABILITY COMPANY

NEXT GEN DIAGNOSTICS, LLC**

Pursuant to Sections 605.0701 and 605.0707 of the Florida Revised Limited Liability Company Act (the "Act"), the undersigned hereby submits these Articles of Dissolution to the Florida Department of State:

1. The name of the limited liability company is NEXT GEN DIAGNOSTICS, LLC (the "Company").
2. The Articles of Organization were filed with the Florida Department of State on June 24, 2022, and assigned Document Number L22000286966.
3. The Company has never commenced doing business.
4. Pursuant to Section 605.0701 of the Act, dissolution was authorized by joint written consent of the manager and the holders of all of the issued and outstanding membership interests in the Company (the "Members"), dated as of October 26, 2022.
5. All debts, obligations and liabilities of the Company have been paid or discharged.
6. The Company has no assets for distribution to the Member.
7. There are no suits pending against the Company in any court.

IN WITNESS WHEREOF, the undersigned hereby executes these Articles of Dissolution as of the 26th day of October, 2022.

/s/ Paul Rhodes

Paul Rhodes, Manager

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**NOTICE OF DISSOLUTION
FOR
FLORIDA LIMITED LIABILITY COMPANY**

This Notice of Limited Liability Company Dissolution is submitted by the dissolving limited liability company named below for resolution of payment of unknown claims against this limited liability company as provided in Section 605.0712, Florida Statutes.

Name of Limited Liability Company: NEXT GEN DIAGNOSTICS, LLC.

Document Number of Limited Liability Company: L22000286966.

Date of Dissolution: The dissolution of the Company shall be effective upon the date of filing of the Articles of Dissolution with the Secretary of State of Florida.

Description of Information that must be included in a written claim: The information that must be included in a claim submitted pursuant to this Notice shall be as follows:

- (a) Name, address and telephone number of claimant.
- (b) Amount of claim, including, if applicable, principal, interest, penalties or other fees or charges.
- (c) A statement of the basis for the claim.
- (d) A copy of any and all writings evidencing the claim or upon which the claim is based.
- (e) A statement of whether or not the claimant has other claims against the company or its managers, officers, agents or representatives, in their capacities as such, and, if the claimant states that the claimant has other claims, a statement of whether or not such other claims are being submitted pursuant to this Notice, or if such other claims will not be so submitted, a statement as to the reason why.

Mailing address where claims can be sent: A claim submitted pursuant to this Notice shall be mailed by certified or registered mail, return receipt requested, postage prepaid, to the following party: NEXT GEN DIAGNOSTICS, LLC, 500 Australian Avenue, Suite 500, West Palm Beach, Florida 33401.

A claim against NEXT GEN DIAGNOSTICS, LLC will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

/s/ Paul Rhodes

Paul Rhodes, Manager