

2/25/23, 11:19 AM

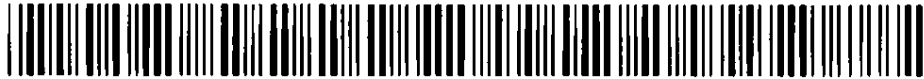
Division of Corporations

L20000416500

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 : JSD & COMPANY PA
Account Number : I20190000114
Phone : (786)286-2705
Fax Number : (305)901-6024

**LLC DISSOLUTION OR WITHDRAWAL
SUPLIHOSPITALAR LLC**

Certificate of Status	1
Certified Copy	0
Page Count	01
Estimated Charge	\$30.00

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Corporate Filing Menu

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ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY

1. The name of a limited liability company is
SUPLIHOSPITALAR LLC

2. The Articles of Organization were filed on OCT 31, 2022 and assigned
document number L22000466582

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).
LACK OF BUSINESS ACTIVITY

5. If there are no members, enter the name and address of the person appointed to wind up the company's
activities and affairs: N/A

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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:

Johanna C

Signature

JOHANNA CORVAIA FUENMAYOR

Printed Name