

LAZARUS 194770
Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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.

((H240001851393))



H240001851393ABCD

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

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

From: Account Name : LAZARUS CORPORATE FILING SERVICE, INC.
Account Number : I20000000019
Phone : (305)552-5973
Fax Number : (305)675-5944

LLC DISSOLUTION OR WITHDRAWAL
CMR ABA THERAPY LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

FILED
MAY 23 PM 4:00
TALLAHASSEE, FLORIDA

Electronic Filing Menu Corporate Filing Menu Help

RECEIVED
MAY 23 PM 3:45
DEPT. OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

MAY 23 2024
T. LEMIEUX

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

1. The name of a limited liability company is EMR ABA Therapy LLC

2. The Articles of Organization were filed on 11/21/12 and assigned document number L22000494770


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)

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).

No Longer in 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:



Signature

Carlos Rodriguez

Printed Name

APR 23 PM 4:00
FILED
FILED
APR 23 PM 4:00