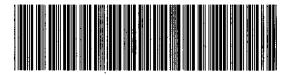
109000108036

(Requestor's Name)			
(Address)			
(Address)			
(Ci	ty/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL	
(Bı	ısiness Entity Name	1	
(2.		,	
(Document Number)			
	odinent ramber,		
Cartified Carries	Cartificatos	E Chatria	
Certified Copies	Certificates of	Status	
Special Instructions to	Filing Officer:		
·			

Office Use Only



900167265329

02/22/10--01023--017 **25.00

10 MAR -4 AM 8: 26
SECRETARY OF STATE
FALLAHASSEE, FLORID.



J. BRYAN

MAR - 5 2009

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: Service And Medical Solutions, 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:			
Solange Vazquez	_		
(Name of Person)			
Service and Medical Solutions, LLC			
(Firm/Company)	SECI	5 **	ر مهست
31 SE 5th street # 2206		MAR-4	
Miami, Fl 33131	RY OF	A	
(City/State and Zip Code)	STATE	8: 26	
For further information concerning this matter, please call:	`Ъ>		
Solange Vazquez (Name of Person) at (305) 491-8568 (Area Code & Daytime Telephone Num	nber)	-	
Enclosed is a check for the following amount:			
\$25.00 Filing Fee Certificate of Status Certified Copy (additional copy is enclosed) \$60.00 Fil Certificate of Certified Copy (additional copy is enclosed)	Status &	osed)	

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301



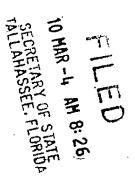
FLORIDA DEPARTMENT OF STATE Division of Corporations

February 23, 2010

SOLANGE VAZQUEZ SERVICE AND MEDICAL SOLUTIONS, LLC 31 SE 5TH STREET #2206 MIAMI, FL 33131

SUBJECT: SERVICE & MEDICAL SOLUTIONS, LLC

Ref. Number: L09000108036



We have received your document for SERVICE & MEDICAL SOLUTIONS, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6043.

Joey Bryan Regulatory Specialist II

Letter Number: 810A00004417

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1. The name of a limited liability company is Service and Medical Solutions,	LLC ES CO
2. The Articles of Organization were filed on Nov L09000108036	ember 09, 2009 and assigned document number
3. The date the dissolution was approved: Febru	ary, 17, 2010
	nited liability company's dissolution pursuant to section
5. CHECK ONE:	
G-OR-	e limited liability company have been paid or discharged.
- · ·	e debts, obligations and liabilities pursuant to s. 608.4421. buted among its members in accordance with their respective
7. CHECK ONE:	
There are no suits pending against the cor	npany in any court.
-OR- Adequate provision has been made for the entered against it in any pending suit.	e satisfaction of any judgment, order or decree which may be
Signatures of the members having the same percentage	of membership interests necessary to approve the dissolution:
Signature	Printed Name
Sorbiazoto	Solange Vazquez