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Office Use Only



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2024 DCT 29 MHII: 15 CLC 29 TO 914

FILE 1ST

EXAMINER: ____

CORPORATION SERVICE COMPANY 1201 Hays Street Tallahassee, FL 32301 Phone: 850-558-1500

CERTIFIED COPY
XX PLAIN STAMPED COPY

____ CERTIFICATE OF STATUS

CONTACT PERSON: Amanda Miller - EXT#

		ACCOUNT NO.	:	1200000001	.95
		REFERENCE	:	1 77	7202264
		AUTHORIZATION	:	Contract of the contract of th	e de la companya della companya della companya de la companya della companya dell
		COST LIMIT	:	\$ 35.0	
ORDER	DATE :	August 14, 2024			
ORDER	TIME :	9:19 AM		·	
ORDER	NO. :	594732-020			
CUSTO	MER NO:	7202264			
	-				
		FOREIGN E	FILI	NGS	
	NAME:	HEALTHSMART I	RX S	SOLUTIONS, I	INC.
		TE PARTNERSHIP LIABILITY COMPAN	NΥ		
XXXX 1	WITHDRAW	AL/CANCELLATION			
PLEASI	E RETURN	THE FOLLOWING AS	S PF	ROOF OF FILI	NG:

COVER LETTER

	mendment Section ivision of Corporat	ions		
SUBJEC	HEALTHSMAR	T RX SOLUTIONS	, INC.	
JOBJEC	ïT:		(Name of Corporation)
DOCUM	IENT NUMBER:	F23000006887		
The enclo	osed withdrawal a	pplication and f	ee are submitted for fil	ing.
Please re	turn all correspond	ence concerning	this matter to the follo	wing:
	 		(Name of Person)	
			(Firm/Company)	
			(Address)	
		(Ci	ity/State and Zip code)	
For furth	er information cond	cerning this matte	er, please call:	
	(Name of Per	rson)	at ()(Area Cod	e & Daytime Telephone Number)
Enclosed	is a check for the a	ımount:		
□ \$35 F	•	5 Filing Fee & Teate of Status	Certified Copy (Additional copy is Enclosed)	& □ \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)
A D P	lailing Address: mendment Section livision of Corporat O. Box 6327 allahassee, FL 323		Street Address: Amendment So Division of Co The Centre of 2415 N. Monr Tallahassee, F	orporations Tallahassee oe Street, Suite 810

HEALTHSMART RX SOLUTIONS, INC.

APPLICATION BY FOREIGN CORPORATION FOR WITHDRAWAL OF AUTHORITY TO TRANSACT BUSINESS OR CONDUCT AFFAIRS IN FLORIDA

(Name of Corporation)

(Document Number of Corp	oration (if known)
Ohio - December 13, 2023	
(Incorporated Under Laws of and date authorized to	o transact business/conduct its affairs)
is corporation is no longer transacting business or condu- untarily surrenders its authority to transact business or co	
is corporation revokes the authority of its registered ago oints the Department of State as its agent for service of page it was authorized to transact business or conduct affairs	process based on a cause of action arising dur
e following is a current mailing address for the corporation	on:
7815 North Palm Avenue, Suite 400	
(Mailing Add	ress)
Fresno, CA 93711	
(City/ State /Z	Zip)
	the future of any change in its mailing addres
ne corporation agrees to notify the Department of State in Supposed by: Alexander Modula	9/3/2024 11:58:25 AM PDT
Signed by:	
Signature Motola Signature of a director, president or other officer - if in the hands of a	· · · · · · · · · · · · · · · · · · ·

CSC 594732-20