166168

(Re	equestor's Name)	
(Ad	ldress)	
(Ac	ldress)	 -
(Ĉi	ty/State/Zip/Phone	; #)
PICK-UP	☐ WAIT	MAIL
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FALL ARX OF STATE

A. BUTLER
JUN - 8 2022

COVER LETTER

TO: Amendment Section

P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations SUBJECT: S.M. Maaps, Inc. DOCUMENT NUMBER: The enclosed Articles of Dissolution and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Sayed Moukhtara (Name of Contact Person) S.M.Maaps, Inc. (Firm/Company) 7717 NW 20th Lane (Address) Gainesville, FL 32605 (City/State and Zip Code) For further information concerning this matter, please call: Sayed Moukhtara (Name of Contact Person) (Area Code) (Daytime Telephone Number) Enclosed is a check for the following amount: ■ \$35 Filing Fee □ \$43.75 Filing Fee & □ \$43.75 Filing Fee & □ \$52.50 Filing Fee, Certificate of Status Certified Copy Certificate of Status & (Additional copy is Certified Copy enclosed) (Additional copy is enclosed) Mailing Address: Street Address: Amendment Section Amendment Section Division of Corporations Division of Corporations

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

FILED

ARTICLES OF DISSOLUTION 2022 APR 21 AM 7: 16

Pursuant to section 607.1403, Florida Statutes, this Florida profit corporation submits a section for submits a section of dissolution:

FIRST:	The name of the corporation as currently filed with the Florida Department of State:		
	S.M. Maaps, Inc.		
SECOND:	The document number of the corporation (if known): K66168		
THIRD:	The date dissolution was authorized:		
	Effective date of dissolution if applicable: (no more than 90 days after dissolution file date)		
	(no more than 90 days after dissolution file date) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date wil not be listed as the document's effective date on the Department of State's records.		
FOURTH:	Dissolution was approved by the shareholders, in the manner required by this chapter and the articles of incorporation.		
	Signature:		
	(By a director, president of other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by		
	that fiduciary)		
	Sayed Moukhtara		
	(Typed or printed name of person signing)		
	Vice President		
	(Title of person signing)		

Filing Fee: \$35