1080000007544

| (Requestor's Name) | | | | |
|---|--|--|--|--|
| (Address) | | | | |
| (Address) | | | | |
| (City/State/Zip/Phone #) | | | | |
| PICK-UP WAIT MAIL | | | | |
| (Business Entity Name) | | | | |
| (Document Number) | | | | |
| Certified Copies Certificates of Status | | | | |
| Special Instructions to Filing Officer: | | | | |
| | | | | |
| | | | | |
| | | | | |

Office Use Only



300318195403

03/10/18--01021--016 **130.00



COVER LETTER

| 10: | Registration Section Division of Corporations | | |
|---------------|--|-----------------------|--|
| SHRI | ECT: Syntro LLC | | |
| 1,74,7174 | Name of | Limited Liability Co | mpany |
| The er submit | nclosed Statement of Revocation of Dissolutted for filing. | tion for Florida Limi | ited Liability Company and fee(s) are |
| Please | return all correspondence concerning this r | natter to: | |
| Kathe | rine L. Amy | | |
| | Contact Person | | - |
| Syntre | LLC | | |
| | Firm/Company | | _ |
| 14260 | W Newberry Rd 335 | | |
| | Address | <u> </u> | _ |
| Newbe | erry. Florida 32669 | | |
| | City, State and Zip Code | · | _ |
| | @syntro.com | | |
| E- | mail address: (to be used for future annual r | report notification) | _ |
| For fur | ther information concerning this matter, ple | rase call: | |
| Kather | rine L. Amy | 954 at (| 253-0924 |
| | Name of Contact Person | Area Code | Daytime Telephone Number |
| | STREET ADDRESS: Registration Section | | MAILING ADDRESS: Registration Section |
| | Division of Corporations | | Division of Corporations |
| | Clifton Building 2661 Executive Center Circle | | P. O. Box 6327 |
| | Tallahaceae Elorida 22201 | | Tallahassee, Fl. 32314 |

STATEMENT OF REVOCATION OF DISSOLUTION FOR FLORIDA LIMITED LIABILITY COMPANY

Pursuant to section 605.0708. Florida Statutes, this Florida limited liability company revokes its articles of dissolution prior to the expiration of 120 days following the effective date (or file date, if no effective date) of the articles of dissolution.

| t. | Syntro ELC The name of the company is: |
|----|---|
| 2. | The document number of the company is |
| 3. | The effective date the Dissolution was filed is |
| 4. | The revocation of dissolution was authorized on |
| 5. | A copy of the Articles of Dissolution is attached. **Add L. Arry Signature of person authorized to submit the revocation of dissolution |
| | |

Filing Fee:

\$100,00

Certified Copy: \$30.00 (optional)

CR2E132 (10/15)

FILED Jul 05, 2018 Secretary of State

ARTICLES OF DISSOLUTION

Pursuant to section 605.0707, Florida Statutes, this Florida limited liability company submits the following Articles of Dissolution:

The name of the limited liability company as currently filed with the Florida Department of State:

SYNTRO, LLC

The document number of the limited liability company: L08000007544

The file date of the articles of organization: January 22, 2008

The effective date of the dissolution if not effective on the date of filing: July 5, 2018

A description of occurance that resulted in the limited liability company's dissolution:

DISCONTINUING MANAGED CARE CONSULTING

The name and address of the person appointed to wind up the company's activities and affairs:

KATHERINE LEE AMY 14260 W NEWBERRY RD - 335 NEWBERRY, FL 32669

I/we submit this document and affirm that the facts stated herein are true. I/we am/are aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in section 817.155, Florida Statutes.

Signature: KATHERINE LEE AMY

Electronic Signature of authorized person