L17000125941

(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:

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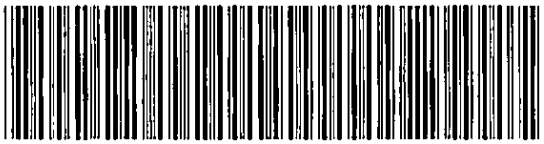

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2022 JUL 13 AM 11:24

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED

FILE 1ST

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

ACCOUNT NO. : I20000000195

REFERENCE : 769327 8299305

AUTHORIZATION :

COST LIMIT : $ 25.00

ORDER DATE : June 23, 2022

ORDER TIME : 8:13 AM

ORDER NO. : 769327-005

CUSTOMER NO: 8299305

DOMESTIC FILINGS

NAME: HELP/SYSTEMS LLC

XX ARTICLES OF DISSOLUTION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_____ CERTIFIED COPY
XX_____ PLAIN STAMPED COPY
_____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Alexxis Weiland - EXT#

EXAMINER'S INITIALS: _____

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

FILED

JUL 13 PM 4:15

SECRETARY OF STATE
TALLAHASSEE, FL

1. The name of a limited liability company is
Help/Systems LLC

2. The Articles of Organization were filed on June 8, 2017 and assigned document number L17000125941

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)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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).
The passage of 90 consecutive days where the entity has no members

The passage of 90 consecutive days where the entity has no members

The passage of 90 consecutive days where the entity has no members

5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:
Matthew Reck, Chief Financial Officer

Help/Systems, LLC (DE)

11095 Viking Drive, Suite 100, Eden Prairie, MN 55344

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:

DocuSigned by:
Matthew Reck
DA3E3E225E994E8...
Signature

Matthew Reck
Printed Name

FILING FEE: $25.00