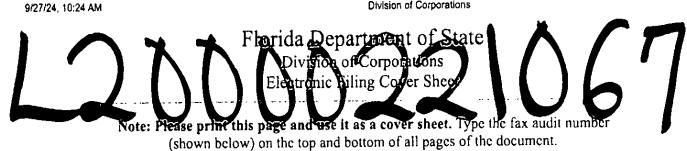
Division of Corporations



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : TAX & FINANCIAL FIRM INC

Account Number : I20240000005 Phone : (214)554-0731 : (813)336-2232 Fax Number

LLC DISSOLUTION OR WITHDRAWAL PHIXSMART LLC

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Certificate of Status	0
Certified Copy	0
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Estimated Charge	\$25.00

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(H24000328694 3) COVER LETTER

TO:	Registration	Section

Division of Corporations

PHIXSMART LLC
SUBJECT: (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:

ABID NAEEM		
	(Name of Person)	
TAX & FINANCIAL FIRM INC		23.5 23.5 24.707
	(Firm/Company)	
2613 KNIGHT ISLAND DR		17.7. C
	(Address)	
BRANDON, FL 33511		E.F.
(C	City/State and Zip Code)	
For further information concerning this matter, pleas	e call:	
ABID NAEEM	214 554-0731 at ()	
(Name of Person)	(Area Code & Daytime Telephone Number	:r)
Enclosed is a check for the following amount:		
\$25.00 Filing Fee and Certificate of Dissolution	☐ \$55.00 Filing Fee, Certificate of Dissolution &	

Mailing Address:

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

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Certified Copy (additional copy is enclosed)

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ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1.	The name of a limited liability company is PHIXSMART LLC
2.	The Articles of Organization were filed on and assigned
	document number L20000221067
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).
	ALL THE MEMBERS AGREE TO DISSOLUTION OF THE LIMITED LIABILITY COMPANY
	ALL THE MEMBERS AGREE TO DISSOLUTION OF THE LIMITED LIABILITY COMPANY
	ALL THE MEMBERS AGREE TO DISSOLUTION OF THE LIMITED LIABILITY COMPANY
5.	If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:
	200 3.6 1
6. ał	Signature of an authorized person or if there are no members, the signature of the person appointed and listed wove to wind up the company's activities and affairs:
יינא	MYSARAH IA ABOUSHARBIEN
	Signature Printed Name

FILING FEE: \$25.00

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