L50337

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP   ☐ WAIT   ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____   Certificates of Status _____

EFFECTIVE DATE
11-30-09

DISS

FILED
2009 NOV 19 PM 10: 23
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Special Instructions to Filing Officer:

Office Use Only

11-20-09

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Dissolution of Corporation

DOCUMENT NUMBER: L50337

The enclosed **Articles of Dissolution** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Mike Patterson
_____
(Name of Contact Person)

c/o Examsoft Worldwide, Inc.
_____
(Firm/Company)

350 Jim Moran Blvd. Suite 120
_____
(Address)

Deerfield Beach   Fl 33442
_____
(City/State and Zip Code)

For further information concerning this matter, please call:

Mike Patterson   at (954) 429-8889 x11
_____   _____
(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
P.O. Box 6327   Clifton Building
Tallahassee, FL 32314   2661 Executive Center Circle
                                              Tallahassee, FL 32301

ARTICLES OF DISSOLUTION

Pursuant to section 607.1403, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

FIRST: The name of the corporation as currently filed with the Florida Department of State:

Systematic Development, Inc.

SECOND: The document number of the corporation (if known): **L50337**

THIRD: The date dissolution was authorized: **10/01/2009**

Effective date of dissolution _if applicable:_ **11/30/2009**

<div align="right">(no more than 90 days after dissolution file date)</div>

FOURTH: Adoption of Dissolution (CHECK ONE)

☑ Dissolution was approved by the shareholders. The number of votes cast for dissolution was sufficient for approval.

☐ Dissolution was approved by the shareholders through voting groups.

The following statement must be separately provided for each voting group entitled to vote separately on the plan to dissolve:

The number of votes cast for dissolution was sufficient for approval by

_____
(voting group)

Signature: _____

(By a director, president or 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)

Stewart Wallach
_____
(Typed or printed name of person signing)

Pres
_____
(Title of person signing)

Filing Fee: $35

Notice of Corporate Dissolution

This notice is submitted by the dissolved corporation named below for resolution of payment of unknown claims against this corporation as provided in s. 607.1407, F.S.

This *"Notice of Corporate Dissolution"* is optional and is not required when filing a voluntary dissolution.

Name of Corporation: **Systematic Development, Inc.**

Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the *Articles of Dissolution*.

Description of information that must be included in a claim:

All information required to validate claim, including name and address of claimant, date of occurrence, service or product provide and amount of claim.

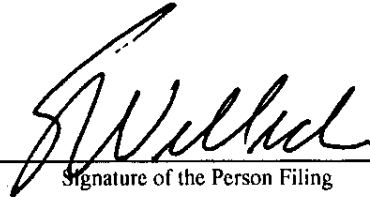Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

350 Jim Moran Blvd, Suite 120

Deerfield Beach   FL 33442

A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

Stewart Wallach, Pres
Printed Name of the Person Filing

Signature of the Person Filing

Fee: No charge if included with Articles of Dissolution. If filed separately $35.00