## P00000064155

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## **COVER LETTER**

TO: Amendment Section Division of Corporations

SUBJECT: Dissolution of SMARTMED SOL	UTIONS, INC.	
DOCUMENT NUMBER: P00000064155	5	
The enclosed Articles of Dissolution and	fee are submitted for filing	<i>.</i> .
Please return all correspondence concerni	ng this matter to the follow	ing:
Justin Russell		
(Name o	f Contact Person)	
Vengroff Williams, Inc.		
(Fi	rm/Company)	
2211 Fruitville Road		
(,	Address)	<del></del>
Sarasota, Florida, 34327		
(City/S	tate and Zip Code)	
For further information concerning this m	atter, please call:	
Justin Russell	at (	
(Name of Contact Person)	(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amo	ount:	
■ \$35 Filing Fee □ \$43.75 Filing Fee & Certificate of Status	& □ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□ \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)

Mailing Address:
Amendment Section **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

Division of Corporations The Centre of Tallahassee

Street Address: Amendment Section

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

FILED

## ARTICLES OF DISSOLUTION

2022 JAN 31 AM 10: 24

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

FIRST:	The name of the corporation as currently filed with the Florida Department of State:  SMARTMED SOLUTIONS, INC.			
SECOND:	The document number of the corporation (if known):			
THIRD:	The date dissolution was authorized:			
	Effective date of dissolution if applicable:  (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 will 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 or other officer - if directors or officers have not been selected, by an interporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary)			
	Justin Russell			
	(Typed or printed name of person signing)			
	Chief Compliance Officer			
	(Title of person signing)			

Filing Fee: \$35