P00000097064

(Red	questor's Name)
(Add	dress)
, (Add	dress)
(City	y/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(Bus	siness Entity Name)
(Doc	cument Number)
Certified Copies	Certificates of Status
Special Instructions to F	Filing Officer:
<u> </u>	

Office Use Only



500144160315

02/24/09--01033--022 **52.50

SECRETARY OF STATE

FILED

Di55.

TB 2-25-00

COVER LETTER

TO: Amendment Section

Division of Corporations		
SUBJECT: Articles of Diss	olution	
DOCUMENT NUMBER: POODO 97	1064	
The enclosed Articles of Dissolution and fee are submitted for	filing.	
Please return all correspondence concerning this matter to the fo	ollowing:	
Christine C. Collin	ns	
Systemetrics (Firm/Company)	, Inc.	
2186 Skmmit Way		
(Address)	. 0	
Palm Harbor FLorida 34684		
(City/State and Zip Code)		
For further information concerning this matter, please call:		
Christine C. Collinsat (727) (Name of Contact Person) (Area Co	771-097/ de & Daytime Telephone Number)	
	,	
Enclosed is a check for the following amount:	.	
Stiling Fee Status Status Certified Copy (Additional copy enclosed)	\$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)	
	STREET ADDRESS:	
	Amendment Section	
• • • • • • • • • • • • • • • • • • •	Division of Corporations Clifton Building	
	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:
	SYSTEMETRICS, INC.
SECOND:	The document number of the corporation (if known): POOOOO97064
THIRD:	The date dissolution was authorized: $\frac{12 31 08}{}$
	Effective date of dissolution if applicable: (no more than 90 days after dissolution file date)
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 grounditted to vote separately on the plan to dissolve:
	The number of votes cast for dissolution was sufficient for approval by (voting group)
	(voting group)
į	Signature: Collins 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)
	Christine Capece Collins
	(Typed or printed name of person signing)
	President
	(Title of person signing)

Filing Fee: \$35