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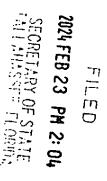
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#### **COVER LETTER**

## **TO:** Amendment Section Division of Corporations

SUBJECT: Dissol	ution of SHERRI DODSWOR	RTH, P.A.	
DOCUMENT NU	P03000039320 JMBER:		
The enclosed Arti	cles of Dissolution and f	ee are submitted for filing	
Please return all co	orrespondence concerning	g this matter to the follow	ing:
Sherri Dodsworth			
	(Name of	Contact Person)	· · · · · · · · · · · · · · · · · · ·
SHERRI DODSWOF	RTH, P.A.		
	(Firm	n/Company)	
104 Heritage Lane			
	(A	ddress)	
Port Saint Joc. FL 32	456		
	(City/Sta	te and Zip Code)	
For further inform	ation concerning this ma	tter, please call:	
Sherri Dodsworth		850-227-5197 at (	
(Name	of Contact Person)	(Area Code) (	Daytime Telephone Number)
Enclosed is a chec	k for the following amou	nt:	
□ \$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

### **Street Address:**

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

### 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:  SHERRI DODSWORTH, P.A.
SECOND:	The document number of the corporation (if known):
THIRD:	The date dissolution was authorized: February 1, 2024
	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 adjustor, 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)
S	Sherri Dodsworth
•	(Typed or printed name of person signing)
	President
	(Title of person signing)

Filing Fee: \$35