PO4 0000 84633

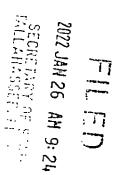
(Re	equestor's Name)	
(Ac	ddress)	
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PICK-UP	☐ WAIT	MAIL
(Bı	usiness Entity Name	e)
(De	ocument Number)	
Certified Copies	Certificates o	of Status
Special Instructions to	Filing Officer:	
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COVER LETTER

TO: Amendment Section

Tallahassee, FL 32314

Division of Corporations

SUBJECT:
DOCUMENT NUMBER: P04000084633
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
MR. STEVEN M. ISRAE (Name of Contact Person)
SMI CONSULTING CORP.
(Firm/Company)
5060 CERROMAR PRIVE (Address)
(Address)
NAPLES, FL. 34112
(City/State and Zip Code)
For further information concerning this matter, please call:
M. STEVEN SRAE at (239-430-0457) (Name of Contact Person) (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount:
\$35 Filing Fee \$\bigcup \\$43.75 Filing Fee & \$\bigcup \\$43.75 Filing Fee & \$\bigcup \\$52.50 Filing Fee, Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional copy is enclosed)
Mailing Address:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

FILED

ARTICLES OF DISSOLUTION

2022 JAN 26 AM 9: 24

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

FIRST:	The name of the corporation as currently filed with the Florida Department of State:		
	SMI CONSULTING CORP.		
SECOND:	The document number of the corporation (if known): P040000 84633		
THIRD:	The date dissolution was authorized: $\frac{4/2/2/}{}$		
	Effective date of dissolution if applicable: 4/2/2/		
	(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: 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)		
	STEVEN M. ISRAEL		
	(Typed or printed name of person signing)		
	PRESIDENT		
(Title of person signing)			

Filing Fee: \$35