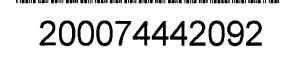
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(Re	equestor's Name)	
(Ad	ldress)	
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, (Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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SECRETARY OF STATE
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COVER LETTER

TO: Amendment Section

Division of Corporations
SUBJECT: Dissolution of A-Ryan Staffing Solutions, Inc
DOCUMENT NUMBER:
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Ryan E. Harvey (Name of Contact Person)
A-Ryan Staffing Solutions, In C. (Erm/Company)
5003 Scarsdalo Manor Lane
(* 1881-188)
Orlando, Fl 32818 (City/State and Zip Code)
(City/State and Zip Code)
For further information concerning this matter, please call:
Ryan E. Harvey at (321) 239-7738 (Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
S35 Filing Fee \$\bigcup \\$43.75 Filing Fee & \$\bigcup \\$43.75 Filing Fee & \$\bigcup \\$52.50 Filing Fee, Certificate of Status & Certificate of Status & Certificate of Status & Certificate Opy (Additional copy is enclosed) (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 Clifton Building 2661 Executive Center Circle

Tallahassee, FL 32301

Service .

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:
	A-Ryan Staffing Solutions, Inc.
SECOND:	The document number of the corporation (if known):
THIRD:	The date dissolution was authorized: $\frac{12}{31} = 5$
	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 group entitled to vote separately on the plan to dissolve:
	The number of votes cast for dissolution was sufficient for approval by
	FI SECRETICALIZATION OF THE SECRET
	(voting group) SRY SSET
	PM 12: 23 PM 12: 23
S	PRIDATE 23
	Signature: Haway C. H
	an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary)
	Ryan E. Harvey. (Typed or printed name of person signing)
	(Typed or printed name of person signing)
	CEO

Filing Fee: \$35