P04000/58218

(Requestor's Name) (Address)	300082374453
(City/State/Zip/Phone #)	12/18/0601035015 ** 43.75
(Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:	FILED 06 DEC 18 PH 12: 46 SEURLIAHASSEE, FLORIDA FILED OF STATE FLORIDA FILED FILED

Office Use Only

COVER LETTER

'TO: Amendment Section

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Division of Corporations		
SUBJECT: Articles of Dissolution for Systrum Cor	P	
DOCUMENT NUMBER:		
The enclosed Articles of Dissolution and fee are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
Diego Norena (Name of Contact Person)		
(Name of Contact Person)		
(Firm/Company)		
12651 NW 14th Street		
12651 NW 14th Street (Address) Sunvise, FL 33323 (City/State and Zin Code)		
(City/State and Zip Code)		
For further information concerning this matter, please call:		
Diego Noveva at (305) 942-6569 (Name of Contact Person) (Area Code & Daytime Telephone Num	nber)	
Enclosed is a check for the following amount:		
Striling Fee S43.75 Filing Fee & S43.75 Filing Fee & S52.50 Filing Fee, Certificate of Status Certified Copy Certificate of Status & Certified Copy (Additional copy is enclosed) (Additional copy is enclosed)	:	
MAILING ADDRESS: Amendment Section STREET ADDRESS: Amendment Section		

Division of Corporations Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle

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: Systrum COVD (F.E.I. SECOND: The document number of the corporation (if known): The date dissolution was authorized: THIRD: 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 gr to vote separately on the plan to dissolve: The number of votes cast for dissolution was sufficient for approval by (voting group) 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)

(Title of person signing)

Business Development Director