

P11000003823

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

(Business Entity Name)

(Document Number)

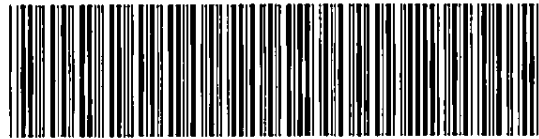
Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

J. HORNE
SEP 22 2023

8/18

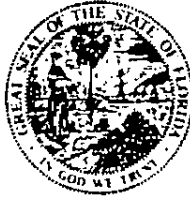
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FILED
23 AUG 18 AM 11:46
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 3, 2023

SILVIE JANKOVA
5936 MORNINGSIDE DR
LAKE WORTH, FL 33463 US

SUBJECT: ENHANCED MANAGEMENT SYSTEMS INC.
Ref. Number: P11000013823

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The form you submitted is for a FOREIGN CORPORATION, but your entity is a FLORIDA CORPORATION. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Jasmine N Horne
Regulatory Specialist II

Letter Number: 423A00017525

AUG 18 2023

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Enhanced Management Systems Inc.
(Name of Corporation)

DOCUMENT NUMBER: P11000013823

The enclosed **withdrawal application** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Silvie Jankova
(Name of Person)

Enhanced Management Systems Inc.
(Firm/Company)

5936 Morningside Dr
(Address)

Lake Wales FL 33463
(City/State and Zip code)

For further information concerning this matter, please call:

Silvie Jankova at (561) 213-8424
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the amount:

- ☒ \$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

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TALLAHASSEE, FLORIDA

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:

Enhanced Management Systems, Inc.

SECOND: The document number of the corporation (if known): P1100013223

THIRD: The date dissolution was authorized: 4/23/23

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 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)

Silvie Jankova

(Typed or printed name of person signing)

P

(Title of person signing)

Filing Fee: \$35