P12000092602

(Re	equestor's Name)	
(Ac	idress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nar	me)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

ř.

Office Use Only



300278288933

10/23/15--01023--001 **43.75





COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: SCRIPT DISPENSE INC
DOCUMENT NUMBER: 22 00 000 92602
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
LUNAY RABEW
(Name of Contact Person)
(Firm/Company) 1302 NW 145T (Address) DORAL FL 33124
(Address)
DORAL FL 33124
(City/State and Zip Code)
For further information concerning this matter, please call:
ZUNAY (ABETO at (Bot) 310 8965 (Name of Contact Person) (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount:
\$35 Filing Fee \$\sum \text{\$\frac{1}{2}}\$
MAILING ADDRESS:STREET ADDRESS:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle

Tallahassee, FL 32301

ARTICLES OF DISSOLUTION

1

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		
	SCRIPT DISPENSE INC		
SECOND:	The document number of the corporation (if known): 7120000692602		
THIRD:	The date dissolution was authorized:		
	Effective date of dissolution if applicable: 101515		
	(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:	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		
	(voting group)		
	Simular Simula		
	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,		
	that fiduciary)		
	DRISHEZ MARQUEZ		
	(Typed or printed name of person signing)		
	DIRECTOR		
	(Title of person signing)		