



**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** KMS KRYLL MEDICAL SYSTEMS, INC

**DOCUMENT NUMBER:** P13000053164

The enclosed **Articles of Dissolution** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

MARCO REIS

(Name of Contact Person)

USATAX CORPORATION

(Firm/Company)

591 E. SAMPLE RD

(Address)

POMPANO BEACH, FL 33064

(City/State and Zip Code)

For further information concerning this matter, please call:

MARCO REIS

(Name of Contact Person)

at ( 9 5 4 ) 7 8 8 - 1 8 1 8

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following 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  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

APPROVED  
AND  
FILED

**ARTICLES OF DISSOLUTION**

14 APR -7 PM 2:48

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Pursuant to section 607.1401, 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:

KMS KRYLL MEDICAL SYSTEMS, INC

SECOND: The document number of the corporation (if known): P13000053164

THIRD: The file date of the articles of incorporation: 06/19/2013

FOURTH: (CHECK AT LEAST ONE BOX)

None of the corporation's shares have been issued.

The corporation has not commenced business.

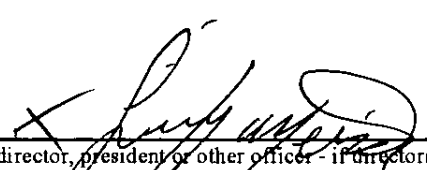
FIFTH: No debt of the corporation remains unpaid.

SIXTH: The net assets of the corporation remaining after winding up have been distributed to the shareholders, if shares were issued.

SEVENTH: Adoption of Dissolution (CHECK ONE)

A majority of the incorporators authorized the dissolution.

A majority of the directors authorized the dissolution.

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.)

LUIZ C. MEISTER

(Typed or printed name of person signing)

PRESIDENT

(Title of Person Signing)