

P15000072000

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS

DEC 1 2015
C LEWIS

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Dissolution of Synna Pharmacy, Inc.

DOCUMENT NUMBER: P15000072000

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

Please return all correspondence concerning this matter to the following:

ILLEANA ARINAGA

(Name of Contact Person)

ATTORNEYS CORP SERVICE

(Firm/Company)

5668 E. 61ST STREET

(Address)

COMMERCE, CA 90040

(City/State and Zip Code)

For further information concerning this matter, please call:

ILLEANA ARINAGA

(Name of Contact Person)

at (800-462-5487 X 115

(Area Code) (Daytime Telephone Number)

Enclosed is a check for the following amount:

- | | | | |
|---|--|---|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input checked="" type="checkbox"/> \$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

ATTORNEYS CORPORATION SERVICE, INC.
5668 EAST 61ST STREET
COMMERCE, CA 90040
TEL: (800) 462-5487 ext. 115 FAX: (800) 388-0330
EMAIL: iarinaga@attorneyscorpsservice.com

DOCUMENT FILING REQUEST LETTER

REGULAR FILING SERVICE

DATE: 11/23/15

FROM: Illeana Arinaga

Client Matter: #9039624

TO: REGISTRATION SECTION
DIVISION OF CORPORATIONS
CLIFTON BUILDING
2661 EXECUTIVE CENTER CIRCLE
TALLAHASSEE, FL. 32301

ATTN: DOCUMENT FILING DIVISION

RE: **SYNNA PHARMACY, INC.**

Enclosed is one of the following: **(X) Articles of Amendment to
Articles of organization**

Return request with filing: **(1) Plain Copy**

Return request via following: **(X) Email or Mail**

Total Page(s) attached including transmittal page:

****Fax/Email a copy of the filed documents upon acceptance of filing****

****PLEASE RETURN FILED DOCUMENTS ATTACHED WITH AN INVOICE TO:
ATTORNEYS CORPORATION SERVICE, INC.
5668 EAST 61ST STREET, COMMERCE, CA 90040****

****PLEASE CONFIRM UPON RECEIVED DOCUMENTS****

NOTE(S):

15 NOV 25 AM 9:43

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:
SYNNA PHARMACY, INC.

SECOND: The document number of the corporation (if known): P15000072000

THIRD: The date dissolution was authorized: November 13, 2015

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: 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)

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)

Phillip Sarkisian

Phillip Sarkisian

(Typed or printed name of person signing)

Chief Executive Officer

CEO

(Title of person signing)