## P18000 096 649

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## **COVER LETTER**

TO: Amendment Section **Division of Corporations** 

SUBJECT:	Articles of Dissolut	ion	
	P18000096649		
DOCUMENT NU	MBER:		
The enclosed Artic	cles of Dissolution and f	ee are submitted for filing	<b>j.</b>
Please return all co	rrespondence concerning	g this matter to the follow	ing:
Ismail Kabook			
	(Name of	Contact Person)	
Violet Medical Suppl	ly Inc		
	(Firm	n/Company)	
7183 Navajo Roa	ad Suite A		
	(A	ddress)	
San Diego CA 93	2119		
	(City/Sta	ate and Zip Code)	
For further inform	ation concerning this ma	tter, please call:	
Ismail Kabook		at (714) 2	54 - 5734 (Daytime Telephone Number)
(Name	of Contact Person)	(Area Code)	(Daytime Telephone Number)
Enclosed is a chec	k for the following amou	unt:	
■ \$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:	STRI	EET ADDRESS:

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## 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: Violet Medical Supply Inc.			
	P18000096649			
SECOND:	The document number of the corporation (if known):  05/28/2019			
THIRD:				
	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 east 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)  LAHASSE			
	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)			
	Ismail Kabook			
	(Typed or printed name of person signing)			
	Owner / President			
	(Title of person signing)			