

P9800007235

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

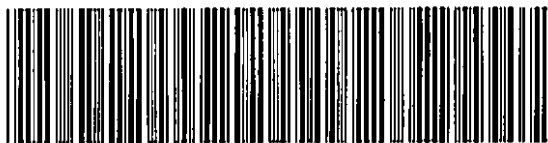
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300317538973

08/24/18--01001--006 **35.00

C. GOLDEN

AUG 28 2018

FILED
18 AUG 23 PM 3:27
2018 AUG 23 AM 8:55
SECRETARY OF STATE
TALLAHASSEE, FL
TALLAHASSEE, FL

SUNSHINE CORPORATE FILING OF FLORIDA INC.

3458 Lakeshore Drive, Tallahassee, Florida 32312

(850) 656-4724

DATE 08/23/2018

****WALK IN****

ENTITY NAME Drugs For Less, Inc

DOCUMENT NUMBER _____

****PLEASE FILE THE ATTACHED AND RETURN****

XXXXXXXXXX

Plain Copy

Certified Copy

Certificate of Status

****PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY****

Certified Copy of Arts & Amendments

Certificate of Good Standing

****APOSTILLE' / NOTARIAL CERTIFICATION****

COUNTRY OF DESTINATION _____

NUMBER OF CERTIFICATES REQUESTED _____

TOTAL OWED \$35.00

CHECK # 5175

Please call Tina at the above number for any issues or concerns. Thank you so much!

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Drugs For Less, Inc.

DOCUMENT NUMBER: P98000007235

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

Please return all correspondence concerning this matter to the following:

Margaret Carr

(Name of Contact Person)

Baker Donelson

(Firm/Company)

165 Madison Ave., Ste. 2000

(Address)

Memphis, TN 38103

(City/State and Zip Code)

For further information concerning this matter, please call:

Margaret Carr

at 901-577-2157

(Name of Contact Person)

(Area Code) (Daytime Telephone Number)

Enclosed is a check for the following amount:

- | | | | |
|--|--|---|---|
| <input 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 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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 24, 2018

SUNSHINE CORPORATE FILING OF FLORIDA INC.
3458 LAKESHORE DRIVE
TALLAHASSEE, FL 32312

SUBJECT: DRUGS FOR LESS, INC.
Ref. Number: P98000007235

*Corrected -
Please allow for
original file date*

We have received your document for DRUGS FOR LESS, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must state the date the dissolution was authorized.

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.

Irene Albritton
Regulatory Specialist II

Letter Number: 118A00017549

10 AUG 27 PM 3:19

FILED

2018 AUG 23 AM 8:55

ARTICLES OF DISSOLUTION

**SECRETARY OF STATE
TALLAHASSEE, FL**

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:
Drugs For Less, Inc.

SECOND: The document number of the corporation (if known): P98000007235

THIRD: The date dissolution was authorized: August 23, 2018

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: Joe Anto
(By a director, ~~officer~~ 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)

Joseph Anto Joe Anto

(Typed or printed name of person signing)

Interim Chief Executive Officer and Chief Financial Officer:

(Title of person signing)