## P99000026834

(Re	questor's Name)				
(Ad	dress)				
(Ad	dress)				
(Cit	ty/State/Zip/Phone	≥ #)			
PICK-UP	WAIT	MAIL			
(Bu	siness Entity Nan	ne)			
,	•	•			
Фс	ocument Number)				
(50	, out to the contract of				
Cardinal Carrier	Carlificator	a E Chatria			
Certified Copies Certificates of Status					
Special Instructions to	Filing Officer:	į.			
		1			
		1			



200030471052

03/17/04--01051--002 \*\*35.00

O4 MAR 17 AN 8: 45
SECRETARY OF STATE

Discolution whatie

Office Use Only

T BROWN MAR 2 2 2004

## TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Notice of Gorprite Disolutione
DOCUMENT NUMBER: P990000 26934/SSM EXPRESS IN
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
MYAH ALI
(Name of Person)
SSM Express Inc (Name of Firm/Company)
7807 N.W. 73RD AVE (Address)
TAMAREAR 72 33321-4950 (City/State/and Zip Code)
(City/State/and Zip Code)
For further information concerning this matter, please call:
X MYHH M1 at (954) 722-0321 (Name of Person) (Area Code & Daytime Telephone Number)
(Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
□ \$35 Filing Fee □ \$43.75 Filing Fee & □ \$43.75 Filing Fee & □ \$52.50 Filing Fee, Certificate of Status Certified Copy (Additional copy is enclosed)  □ \$52.50 Filing Fee, Certified Copy (Additional copy is enclosed)
MAILING ADDRESS: Amendment Section  STREET ADDRESS: Amendment Section
Division of Corporations Division of Corporations
P.O. Box 6327 409 E. Gaines Street

Tallahassee, Florida 32399

Tallahassee, Florida 32314

## ARTICLES OF DISSOLUTION

Pursuant to s of dissolution	ection 607.1403, Florida Statutes, this Florida profit corporation submits the following articles  1:					
FIRST:	The name of the corporation as currently filed with the Department of State:  SSM Express Inc.  The document number of the corporation (if known): P99000026334					
SECOND:	The document number of the corporation (if known): P99000026334					
THIRD:	The date dissolution was authorized: 3804					
	Effective date of dissolution if applicable: 3/3/04 (no more than 90 days after dissolution file date)					
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 of the shareholders through voting groups.					
	The following statement must be separately provided for each voting group entitled to					
	The number of votes cast for dissolution was sufficient for approval by					
	Signed this 8 march 20 pg.					
	Signed this day of					
Signat	ure:  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)					
	(Typed or printed name of person signing)					
	Pafs (D Fn T  (Title of person signing)					

## **Notice of Corporate Dissolution**

This notice is submitted by the dissolved corporation named below for resolution of payment of unknown claims against this corporation as provided in s. 607.1407, F.S.

This "Notice of Corporate Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Corporation:	SSM	EXP	RES	Inc		
Date of dissolution will be specified in the Articles of		lution is filed v	vith the I	Department of State or	28	
Description of information	n that must be inclu	ided in a clain	ı:			
	None					
Mailing address where ch	-			o the Division of Corpo AUE 33321-4950		
<u> </u>	74	MARAC	n.	33321-4950	<del></del> ,	, -
		<del>,</del>			=	-1.
A claim against the above is commenced within 4 y	ears after the filing			a proceeding to enforce	the claim	
	e of the Person Filing	<del></del>	(2)_	Signature of the Per	Son Filing	

Printed Name of the Person Filing