P99000035057

(Re	equestor's Name)	
(Ad	idress)	
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SECRETARY OF STATE

Dissolution

TB Z 12-NO

COVER LETTER

TO: Amendment Section

Division of Corporations		
SUBJECT: S.M.I. Financial Service	ces Corporation	
DOCUMENT NUMBER: P9900003	5057	
The enclosed Articles of Dissolution and f	fee are submitted for filing.	
Please return all correspondence concerning	g this matter to the following:	
Bruce To	•	
	Contact Person)	
(Firm/Company)		
7850 Ulmerton Road, Suite 7B		
. (A	address)	
Largo, FL 33771		
(City/Sta	ate and Zip Code)	
For further information concerning this ma	atter, please call:	
Bruce To	at (727)773-6411	
(Name of Contact Person)	(Area Code & Daytime Telephone Number)	
Enclosed is a check for the following amou	unt:	
✓\$35 Filing Fee ☐\$43.75 Filing Fee & Certificate of Status	Status & Certified Copy is enclosed) \$\text{Status Filing Fee} & Certificate of Status & Certified Copy} & 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	

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:		
	S.M.I. Financial Services Corporation		
SECOND:	The document number of the corporation (if known): P99000035057		
THIRD:	The date dissolution was authorized: 12/01/07		
	Effective date of dissolution <u>if applicable</u> : 12/31/07 (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 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 SECRETARY OF SECRETARY O		
	(voting group)		
	F STATE FLORIDA		
	Signature:		
	(By a director, procedent 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)		
	Bruce To		
	(Typed or printed name of person signing)		
	President		
	(Title of person signing)		

Filing Fee: \$35