MOYOUXU02912

(Requestor's Name)	
(Address)	
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(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	

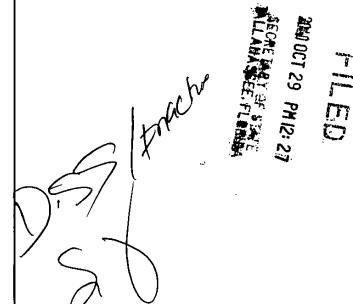
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COVER LETTER

Division of Corporations
SUBJECT: ARTICLES OF DISSOLUTION
DOCUMENT NUMBER: NO400002992
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
MATTHEWATER HUUSE (Name of Contact Person)
NOT APPLICABLE (Firm/Company)
1802 DENIM STREET (Address)
DULUTH, MN 55811 (City/State and Zip Code)
(City/State and Zip Code)
For further information concerning this matter, please call:
MATTHEWNATERHOUSE at (218) 491-3190
(Name of Contact Person) (Area Code & DaytimeTelephone Number)
Enclosed is a check for the following amount:
\$35 Filing Fee \$\bigsquare \\$43.75 Filing Fee & \bigsquare \\$43.75 Filing Fee & \bigsquare \\$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed) Certified Copy (Additional copy is enclosed)
MAILING ADDRESS

MAILING ADDRESS:

TO: Amendment Section

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 617.1401, Florida Statutes, this Florida not for profit corporation submits the following

Articles of Dissolution:		
FIRST:	The name of the corporation as currently filed with the Florida Department of State: WILD GARDENS ZOOLOGICAL PARK INC.	
SECOND:	The document number of the corporation (if known): N 6400002992	
THIRD:	The file date of the articles of incorporation: $03/24/64$	
FOURTH	The corporation has not commenced to conduct its affairs.	
FIFTH:	No debts of the corporation remains unpaid.	
SIXTH:	No debts of the corporation remains unpaid. Adoption of Dissolution (CHECK ONE) (Note: Cannot be authorized by an incorporator if the corporation has directors) The dissolution was authorized by a majority of the directors:	
	☐ The dissolution was authorized by a majority of the directors: OR	
	The dissolution was authorized by an incorporator.	
	☐ The dissolution was authorized by a majority of the incorporators.	
Signature: (By the chairman or vice chairman of the board, president or other officer- if directors 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)		
	PRESIDENT/CED/INCORPORACOR (Title of person signing)	

Filing Fee: \$35