Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Email Address:

Account Name : ALTON NORTH AMERICA INC.

Account Number : I20100000010 Phone : (305)393-8662 Fax Number : (305)397-0323

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

REVOCATION OF DISSOLUTION CHERRYGARDEN INC.

| Certificate of Status | 1 |
|-----------------------|---------|
| Certified Copy | 1 |
| Page Count | 01 |
| Estimated Charge | \$52.50 |

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Electronic Filing Menu

of CHERRYGARDEN INC.

Pursuant to section 607.1404, Florida Statutes, this Florida profit corporation revokes its Articles of Dissolution prior to the expiration of 120 days following the effective date (or file date, if no effective date) of the Articles of Dissolution:

FIRST: The name of the corporation is: CHERRYGARDEN INC.

SECOND: The document number of the corporation is P13000042385

THIRD: The effective date of the Articles of Dissolution filed with the Florida Department of State is April 28th 2015.

FOURTH: The Revocation of Dissolution was authorized on April 28th 2015.

FIFTH: Adoption of Revocation of Dissolution

The shareholders revoked the dissolution and the number of votes cast was sufficient for approval.

SIXTH: A copy of the Articles of Dissolution is attached.

| Aues |
|---------------------------|
| Signature of President |
| Alexander Auer 04/27/2015 |
| Printed Name and Date |
| President |
| TITLE |

FILED Apr 28, 2015 Secretary of State

ARTICLES OF DISSOLUTION

Pursuant to section 607.1403, Florida Statutes, this Florida corporation submits the following Articles of Dissolution:

FIRST:

The name of the corporation as currently filed with the Florida Department of State:

CHERRYGARDEN INC.

SECOND:

The document number of the corporation: P13000042385

THIRD:

The date dissolution was authorized: April 27, 2015

FOURTH:

Dissolution was approved by the shareholders. The number of votes cast for dissolution was sufficient for approval.

I submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in section 817.155, Florida Statutes.

Signature: ALEXANDER AUER

PRESIDENT

Electronic Signature of Signing Officer, Director, Incorporator or Authorized Representative

FILED Apr 28, 2015 Secretary of State

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.

Name of Corporation:

CHERRYGARDEN INC.

Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the Articles of Dissolution.

Description of information that must be included in a claim:

1, DATE 2, TYPE 3, AMOUNT

Mailing address where claims can be sent:

ALEXANDER AUER RIESLINGWEG 2 LOERZWEILER, GERMANY, GE 55298 GE

A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

I submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in section 817.155, Florida Statutes.

Signature: ALEXANDER AUER

Electronic Signature of the Person Filing