## P 15000035271

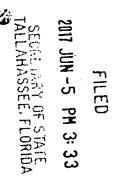
| questor's Name)   |                                                                                          |
|-------------------|------------------------------------------------------------------------------------------|
| dress)            |                                                                                          |
| dress)            |                                                                                          |
| y/State/Zip/Phone | e #)                                                                                     |
| WAIT              | MAIL                                                                                     |
| siness Entity Nar | ne)                                                                                      |
| cument Number)    |                                                                                          |
| _ Certificates    | s of Status                                                                              |
| Filing Officer:   | :                                                                                        |
|                   |                                                                                          |
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Office Use Only



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C. GOLDEN

JUN - 7 2017

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

Tallahassee, FL 32314

| SUBJECT: PALM IMPORTING, INC. Dissol                                      | lution                                                                                                                                                                                |
|---------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| DOCUMENT NUMBER: P15000035271                                             |                                                                                                                                                                                       |
| The enclosed Articles of Dissolution and                                  | fee are submitted for filing.                                                                                                                                                         |
| Please return all correspondence concerning                               | ng this matter to the following:                                                                                                                                                      |
| SANDY PAK                                                                 |                                                                                                                                                                                       |
| (Name of                                                                  | Contact Person)                                                                                                                                                                       |
| PETER MOK, CPA, P.C.                                                      |                                                                                                                                                                                       |
| (Fir                                                                      | m/Company)                                                                                                                                                                            |
| 7 CHATHAM SQUARE, SUITE 303                                               |                                                                                                                                                                                       |
| ( <i>F</i>                                                                | Address)                                                                                                                                                                              |
| NEW YORK, NY 10038                                                        | <i>;</i> • •                                                                                                                                                                          |
| (City/St                                                                  | ate and Zip Code)                                                                                                                                                                     |
| For further information concerning this ma                                | atter, please call:                                                                                                                                                                   |
| SANDY PAK                                                                 | at ( <sup>212-219-3698</sup>                                                                                                                                                          |
| (Name of Contact Person)                                                  | (Area Code) (Daytime Telephone Number)                                                                                                                                                |
| Enclosed is a check for the following amo                                 | unt:                                                                                                                                                                                  |
| Certificate of Status                                                     | □ \$43.75 Filing Fee & □ \$52.50 Filing Fee, Certified Copy (Additional copy is enclosed)  □ \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed) |
| MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327 | 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:  PALM IMPORTING, INC.                                                                                                                                                   |  |  |  |
|---------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|
| SECOND: | D: The document number of the corporation (if known): P15000035271                                                                                                                                                                                           |  |  |  |
| THIRD:  | The date dissolution was authorized: MARCH 31, 2017                                                                                                                                                                                                          |  |  |  |
|         | Effective date of dissolution if applicable: MARCH 31, 2017                                                                                                                                                                                                  |  |  |  |
|         | (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 willing the 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 AASSEE                                                                                                                                                                               |  |  |  |
|         | (voting group)  FORDER  (voting group)                                                                                                                                                                                                                       |  |  |  |
|         | Signature: (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)                                 |  |  |  |
|         | KELLEN CHOW                                                                                                                                                                                                                                                  |  |  |  |
|         | (Typed or printed name of person signing)                                                                                                                                                                                                                    |  |  |  |
|         | PRESIDENT                                                                                                                                                                                                                                                    |  |  |  |
|         | (Title of person signing)                                                                                                                                                                                                                                    |  |  |  |