

Florida Department of State  
Division of Corporations  
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**Nonprofits**

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To:  
Division of Corporations  
Fax Number : (850)617-6380

From:  
Account Name : ALTON NORTH AMERICA INC.  
Account Number : I20100000010  
Phone : (305)393-8662  
Fax Number : (305)397-0323

**DISSOLUTION OR WITHDRAWAL  
SANOPOLY CORP**

Certificate of Status	0
Certified Copy	1
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**ARTICLES OF DISSOLUTION  
of  
SANOPOLY CORP**

*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:  
**SANOPOLY CORP**

**SECOND**

The document number of the corporation is **P17000011565**

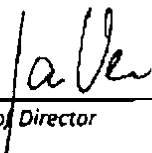
**THIRD**

The date dissolution was authorized on November 27th, 2020

**FOURTH**

Adoption of Dissolution

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



\_\_\_\_\_  
*Signature of Director*

**Jan Veen  
11/27/2020**

\_\_\_\_\_  
*Printed Name and Date*

**Director**

\_\_\_\_\_  
*TITLE*

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## 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: **SANOPOLY CORP**

Description of information that must be included in a claim:

1. Date
2. Type
3. Amount

Mailing address where claims can be sent:


Sanopoly GmbH  
Max-Planck-Str. 20  
63303 Dreieich  
Germany

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.

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Jan Veen

\_\_\_\_\_  
Printed Name of the Person Filing

  
\_\_\_\_\_  
Signature of the Person Filing