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COVER LETTER

Division of Corporations FOLIAGE FOREST, INC. SUBJECT: DOCUMENT NUMBER: The enclosed Articles of Dissolution and fee are submitted for filing. Please return all correspondence concerning this matter to the following: DON CHIN (Name of Contact Person) FOLIAGE FOREST, INC. (Firm/Company) 14720 SW 167 STREET (Address) MIAMI, FL 33187 (City/State and Zip Code) For further information concerning this matter, please call: DON CHIN (Area Code) (Daytime Telephone Number) (Name of Contact Person) Enclosed is a check for the following amount: Ez \$35 Filing Fee ☐ \$43.75 Filing Fee & ■ \$43.75 Filing Fee & ☐ \$52.50 Filing Fee, Certificate of Status & Certificate of Status Certified Copy (Additional copy is Certified Copy (Additional copy is enclosed) enclosed) Street Address: Mailing Address: Amendment Section

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

TO: Amendment Section

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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 S FOLIAGE FOREST, INC. | tate: | |
|---------|---|--------------------------|--|
| SECOND: | The document number of the corporation (if known): | | |
| THIRD: | The date dissolution was authorized: | | |
| | Effective date of dissolution if applicable: (no more than 90 days after dissolution file Note: If the date inserted in this block does not meet the applicable statutory filing requirement not be listed as the document's effective date on the Department of State's records. | date) is, this date will | |
| FOURTH: | Dissolution was approved by the shareholders, in the manner required by this chapter and the articles of incorporation. | | |
| | 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) | 2020 JUL 10 AH 9: 12 | |
| | DON CHIN | | |
| | (Typed or printed name of person signing) | | |
| | PRESIDENT | | |
| | (Title of person signing) | | |

Filing Fee: \$35