## 100000015770

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K SALY DEC 2 1/2019 CORPORATION SERVICE COMPANY

1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 105491

5491 / 7918422

AUTHORIZATION

COST LIMIT : \$ 25.00

ORDER DATE : December 17, 2019

ORDER TIME : 10:38 AM

ORDER NO. : 105491-005

CUSTOMER NO: 7918422

\_\_\_\_\_\_

## DOMESTIC FILINGS

NAME: QUALITY ASSURANCE TESTING

LABORATORIES, LLC

XX ARTICLES OF DISSOLUTION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

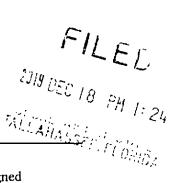
YX PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Amanda Robinson - EXT# 62968

EXAMINER'S INITIALS:

## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY



1.	The name of a limited liability company is	the same
	Quality Assurance Testing Laboratories, LLC	MICAHASSIN
2.	The Articles of Organization were filed on12/20/2	
	document number <u>L00000015770</u>	
3.	The delayed effective date the dissolution if not effective date cannot be prior to or more the Note: If the date inserted in this block does not meet the applisted as the document's effective date on the Department of	han 90 days later than date document is received for filing) oplicable statutory filing requirements, this date will not be
4.	A description of occurrence that resulted in the limited 605.0707, Florida Statutes, (copy 605.0707 on back cov	liability company's dissolution pursuant to section ver letter).
	Dissolution was approved by the sole member.	<u>Preferred Materials. Inc., by written consen</u> t.
5.	If there are no members, enter the name and address of activities and affairs:	the person appointed to wind up the company's
6. lis	Signature of an authorized person or if there are no meted above to wind up the company's activities and affair	mbers, the signature of the person appointed and rs:
/	1 mm	David M. Toolan, Asst. Secretary Printed Name
	Signature	rimicu ivaine

**FILING FEE: \$25.00**