| (Requestor's Name) (Address) | 90017096349 |
|---|--|
| (Address) | |
| (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) | 03/03/1001009021 ** |
| (Document Number) | |
| Certified Copies Certificates of Status | |
| Special Instructions to Filing Officer: | MICHAN -3 PM 3: 30 MICHANASSEE FLORIDA |

Office Use Only

3/8/10



5.00





COVER LETTER

| Division of Corporations | | |
|---|--|--|
| SUBJECT: DISSOLUE CORPORATION | | |
| DOCUMENT NUMBER: NO40000 SYZ4 | | |
| The enclosed Articles of Dissolution and fee are submitted for filing. | | |
| Please return all correspondence concerning this matter to the following: | | |
| Name of Contact Person) | | |
| | | |
| KINGDOM SEEDS INTERNATIONAL INC. (Firm/Company) | | |
| | | |
| 4887 MAURBACH TER. (Address) | | |
| NORTH PORT FL (City/State and Zin Code) | | |
| (City/State and Zip Code) | | |
| For further information concerning this matter, please call: | | |
| Name of Contact Person) at (941) 473 798 / (Name of Contact Person) (Area Code & Daytime Telephone Number) | | |
| (Name of Contact Person) (Area Code & DaytimeTelephone Number) | | |
| Enclosed is a check for the following amount: | | |
| \$35 Filing Fee \$\bigcup \\$43.75 Filing Fee & \$\bigcup \\$43.75 Filing Fee & \$\bigcup \\$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed) Certificate of Status & Certified Copy (Additional copy is enclosed) | | |

MAILING ADDRESS:

TO: Amendment Section

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

STREET ADDRESS:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



ARTICLES OF DISSOLUTION

Pursuant to section 617.1403, Florida Statutes, this Florida not for profit corporation submits the following Articles of Dissolution:

| FIRST: | The name of the corporation as currently filed with the Florida Department of State: | | |
|---------|--|--|--|
| | KINGDOM SEEDS INTERNATIONAL INC. | | |
| SECOND: | The document number of the corporation (if known): NOYOOOOS424 | | |
| THIRD: | Adoption of Dissolution (COMPLETE SECTION I OR II) | | |
| | SECTION I If the corporation has members entitled to vote: | | |
| | (CHECK/COMPLETE ONE) | | |
| | The date of the meeting of members at which the resolution to dissolve was adopted | | |
| | | | |
| | members was sufficient for approval. | | |
| | ☐ The resolution was adopted by written consent of the members and executed in accordance with section 617.0701, Florida Statutes. | | |
| | SECTION II If the corporation has no members or members entitled to vote on the dissolution: | | |
| | The corporation has no members or members entitled to vote on the dissolution. | | |
| | The date of adoption of the resolution by the board of directors was $\frac{2/25/10}{}$. | | |
| | The number of directors in office was $\frac{4}{2}$ and the vote for resolution was | | |
| | for and against. (must be a majority vote) | | |

| FOURTH: | Effective date of dissolution if applicable: | 3/1/10 |
|---------|---|--|
| | | (no more than 90 days after dissolution file date) |
| | Signature (By the chairman or vice chairman of officer- if directors have not been select the hands of a receiver, trustee, or other by that fiduciary.) | cted, by an incorporator- if in |
| | $\frac{NICHOLASSER}{\text{(Typed or printed name of th}}$ | |
| | PAESINEAUT | |

FILING FEE: \$35

(Title of person signing)