(Re	equestor's Name)	
(Δ.	ddress)	
(^.		
(Ac	idress)	
(Ci	ty/State/Zip/Phone #	#)
PICK-UP	☐ WAIT	MAIL.
(Bu	usiness Entity Name	9)
/D	ocument Number)	
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Certified Copies	Certificates o	of Status
Special Instructions to	Filing Officer:	!
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COVER LETTER

TO: Amendment Section Division of Corporations		
SUBJECT: Corporate Disso	lution	
DOCUMENT NUMBER: P00000	062403	
The enclosed Articles of Dissolution and	fee are submitted for filir	g.
Please return all correspondence concernin	g this matter to the follow	ving:
Deborah Prock, Corpor	ate Officer	
(Name of	Contact Person)	
Applied Nitrous Techno	ology, Inc.	
(Fire	m/Company)	
1018 Gateway Drive Su	uite A	
Mooresville, NC 28115	ddress)	
(City/Sta	ate and Zip Code)	
For further information concerning this ma	itter, please call:	
Deborah Prock, Officer	at (704) 6	660-5060
(Name of Contact Person)	(Area Code &	2 Daytime Telephone Number)
Enclosed is a check for the following amou	ınt:	
\$35 Filing Fee \$2 \$43.75 Filing Fee & Certificate of Status	\$43.75 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 Tallahassee, FL 32314	Ame Divi Clift	EET ADDRESS: Indment Section Ission of Corporations Industry Indus

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:		
	Applied Nitrous Technology, Inc.			
SECOND:	The document number of the corporation (if known): P0000062403			
THIRD:	The date dissolution was authorized: 11/30/12			
	Effective date of dissolution <u>if applicable</u> : 12/31/12 (no more than 90 days after dissolution	file date)		
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 ento vote separately on the plan to dissolve:	ntitled		
	The number of votes cast for dissolution was sufficient for approval by			
	(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)	DIVISION OF CORPORALION		
	Deborah Prock	ن نست تنب س		
	(Typed or printed name of person signing)			
	Corporate Officer			
	(Title of person signing)			

Filing Fee: \$35