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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name

: C T CORPORATION SYSTEM EFFECTIVE DATE

Account Number : FCA00000023

Phone

: (850)205-8842

Fax Number

: (850)878-5368

DISSOLUTION OR WITHDRAWAL CONAD, INC.

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COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT:	CONAD, INC.
DOCUMENT NUMBER:	P01000051607
The enclosed Articles of Diss	solution and fee are submitted for filing.
Please return all corresponder	nce concerning this matter to the following:
PATRIK VAN CAUTER	
	(Name of Contact Person)
	(Firm/Company)
PIETER GORUSSTRAAT 23	(
	(Address)
ZELE, BE 9240 BE	
	(City/State and Zip Code)
For further information conce.	rning this matter, please call:
JOHNSON S. SAVARY, JR.	at {
(Name of Contact I	Person) (Area Code) (Daytime Telephone Number)
Enclosed is a check for the fol	llowing amount:
	Filing Fee & U \$43.75 Filing Fee & U \$52.50 Filing Fee, te of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional copy is enclosed) (Additional copy is enclosed)
MAILING ADDRESS: Amendment Section Division of Corporation P.O. Box 6327 Tallahassee, FL 32314	Amendment Section Division of Corporations Clifton Building

Tallahassee, FL 32301

1/21/2016 12:03:29 PM From: To: 8506176380(2/4)

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1/20/2018 9:23:56 AM PAGE

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Fax Server



January 20, 2016

FLORIDA DEPARTMENT OF STATE Division of Corporations

CONAD, INC. PIETER GORUSSTRAAT 23 BE ZELE,

SUBJECT: CONAD, INC. REF: P01000051607

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The date of adoption/authorization of this document must be a date on or prior to submitting the document to this office, and this date must be specifically stated in the document. If you wish to have a future effective date, you must include the date of adoption/authorization and the effective date. The date of adoption/authorization is the date the document was approved.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton Regulatory Specialist II FAX Aud. #: H16000014319 Letter Number: 516A00001176

Placed raids original fling date of submission

P.O BOX 6327 - Tallahassee, Florida 32314

EFFECTIVE DATE

Pursuant to section 607.1403, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

LIK21:	Ine name of the corporation as currently filed with the Florida Department of State:
SECOND:	The document number of the corporation (if known): F01000051607
THIRD:	The date dissolution was authorized; 01/19/2016
	Bffective date of dissolution if applicable:
	Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date vent has been as the document's effective date on the Department of State's records.
FOURTH:	Adoption of Dissolution (CHECK ONE)
	Dissolution was approved by the shareholders. The number of votes cast for dissolutio was sufficient for approval.
	Dissolution was approved by the shareholders through voting groups.
	The following statement must be separately provided for each voting group entitled to vote separately on the plan to dissolve:
	The number of votes east for dissolution was sufficient for approval by
	(voting group)
∢X	Signature: M1
~	(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)
	PATRIK VAN CAUTER
	(Typed or printed nums of person signing)
	DIRECTOR/AUTHORIZED SHAREHOLDER
	(Title of person signing)