## 06000118050

| (Requestor's Name)                        |   |  |  |  |
|---|---|--|--|--|
| (Address)                                 | 100131040201                                      |  |  |  |
| (Address)                                 |   |  |  |  |
| (City/State/Zip/Phone #)                  | 06/13/0801022020 **35.00                          |  |  |  |
| (Business Entity Name)  (Document Number) |   |  |  |  |
| Certified Copies Certificates of Status   | 2008 JUN 13 AM S<br>SECRETARY OF STALLAHASSEE. FL |  |  |  |
| Special Instructions to Filing Officer:   | AM 9: 53 YOF STATE REE. FLORIDA                   |  |  |  |
|   |   |  |  |  |

Office Use Only

## **COVER LETTER**

TO: Amendment Section
Division of Corporations

Tallahassee, FL 32314

| SUBJECT: Consumer Testing Laboratories (Bangladesh) Limited, Inc.   |  |  |
|---|--|--|
| DOCUMENT NUMBER: P06000118050   |  |  |
| The enclosed Articles of Dissolution and fee are submitted for filing.  |  |  |
| Please return all correspondence concerning this matter to the following:   |  |  |
| A. Kirk Gasperecz, Esq.   |  |  |
| (Name of Contact Person)  |  |  |
| Adams and Reese LLP   |  |  |
| (Firm/Company)  |  |  |
| 1500 One Shell Square   |  |  |
| (Address)   |  |  |
| New Orleans, LA 70139   |  |  |
| (City/State and Zip Code)   |  |  |
| For further information concerning this matter, please call:  |  |  |
| Kirk Gasperecz <u>at (_505)</u> <u>585-0408</u>   |  |  |
| (Name of Contact Person) (Area Code & Daytime Telephone Number)   |  |  |
| Enclosed is a check for the following amount:   |  |  |
| 7\$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)  Certified Copy  (Additional copy is enclosed) |  |  |
| MAILING ADDRESS:STREET ADDRESS:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton Building  |  |  |

2661 Executive Center Circle

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:  |                  |             |               |  |
|---------|---|------------------|-------------|---------------|--|
|         | Consumer Testing Laboratories (Bangladesh) Limite   | d, Inc           |             |               |  |
| SECOND: | The document number of the corporation (if known): P06000118050   |                  |             |               |  |
| THIRD:  | The date dissolution was authorized: 06/10/2008   |                  |             |               |  |
|         | Effective date of dissolution <u>if applicable:</u> (no more than 90 days after diss  | olution file     | date)       |               |  |
| FOURTH: | Adoption of Dissolution (CHECK ONE)   |                  | ,           |               |  |
|         | Dissolution was approved by the shareholders. The number of votes was sufficient for approval.  | cast for         | disso!      | lution        |  |
|         | Dissolution was approved by the shareholders through voting group   | S.               |             |               |  |
|         | The following statement must be separately provided for each voting grate to vote separately on the plan to dissolve:   | oup enti         | tled        |               |  |
|         | The number of votes cast for dissolution was sufficient for approval by   | SECRET<br>TALLAH | 2008 JUN 13 | entra<br>Care |  |
|         | (voting group)  | ARY OF           | A           |               |  |
| s       | Signature.  | STATE<br>LORIDA  | 9: 53       |               |  |
| /       | (By a director, president or other officer - if directors or officers have not been selected an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary that fiduciary) | l, by<br>y, by   |             |               |  |
|         | Stewart A. Satter   |                  |             |               |  |
|         | (Typed or printed name of person signing)   |                  |             |               |  |
|         | Secretary   |                  |             |               |  |
| -       | (Title of person signing)   | <del></del>      |             |               |  |

Filing Fee: \$35