

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.**

((H14000034952 3)))



H140000349523ABC

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.**

**To:**

Division of Corporations  
Fax Number : (850)617-6380

**From:**

Account Name : ALTON NORTH AMERICA INC.  
Account Number : I20100000010  
Phone : (305)393-8662  
Fax Number : (305)397-0323

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

**Email Address:** \_\_\_\_\_

**REVOCATION OF DISSOLUTION  
MASTER MIND SYNTHESIS INC.**

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$35.00

RECEIVED

14 FEB 12 PM 12:08

FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

Any Diss  
w/notice  
@ 2/13/14

**ARTICLES OF DISSOLUTION**  
**of**  
**MASTER MIND SYNTHESIS INC.**

*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:  
**MASTER MIND SYNTHESIS INC.**

**SECOND**

The document number of the corporation is **P09000085986**

**THIRD**

The date dissolution was authorized on February 1st 2014

**FOURTH**

*Adoption of Dissolution*

Dissolution was approved by the shareholders. The number of votes cast for dissolution was sufficient for approval.



*Signature of President*

**Christian Maier 02/11/2014**

*Printed Name and Date*

**President**

*TITLE*

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATION  
14 FEB 12 PM 8:54

## **Notice of Corporate Dissolution**

This notice is submitted by the dissolved corporation named below for resolution of payment of unknown claims against this corporation as provided in s. 607.1407, F.S.

Name of Corporation: **MASTER MIND SYNTHESIS INC.**

Description of information that must be included in a claim:

1. Date
2. Type
3. Amount

Mailing address where claims can be sent:

Christian Maier  
1-19 Allen Street #14  
Pymont NSW 2009  
Australia

A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

Christian Maier

Printed Name of the Person Filing

C. Maier

Signature of the Person Filing