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COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Dissolution of No	rdik Destiny Corporation Inc.
DOCUMENT NUMBER: P10000	0025915
The enclosed Articles of Dissolution and	fee are submitted for filing.
Please return all correspondence concerning	ng this matter to the following:
Kristina Brough	
(Name of	Contact Person)
Nordik Destiny Corpora	ation Inc.
(Fir	m/Company)
454 Moffat Loop	
(A	Address)
Oviedo, FL 32765	
(City/St	ate and Zip Code)
For further information concerning this ma	atter, please call:
Kristina Brough	at (407) 366-5764
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amo	unt:
□ \$35 Filing Fee □ \$43.75 Filing Fee & Certificate of Status	□ \$43.75 Filing Fee & □ \$52.50 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	STREET ADDRESS: Amendment Section Division of Corporations Clifton 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: Nordik Destiny Corporation Inc.	
SECOND:	The document number of the corporation (if known): P10000025915	
THIRD:	The date dissolution was authorized: December 31, 2014	
	Effective date of dissolution if applicable: (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 entito vote separately on the plan to dissolve:	The following statement must be separately provided for each voting group entitled to vote separately on the plan to dissolve:	
	The number of votes cast for dissolution was sufficient for approval by	
	Z215	
	(voting group) (voting group) AHASSEE ARY SEE (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)	
	Kristina E. L. Brough	
	(Typed or printed name of person signing)	
	President & CEO	
	(Title of person signing)	

Filing Fee: \$35

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.

This "Notice of Corporate Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Corporation: Nordik Destiny Corporation Inc.

Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the *Articles of Dissolution*.

Description of information that must be included in a claim:

vendor name, address, and contract/sales representative; photocopy of original order; full description of service or charge; date of service or delivery; location for performed service or delivery of goods; name of authorized receiver/signer of service or goods; and photocopy of signed receipt

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

Kristina E. L. Brough

RE: Nordik Destiny Corporation Inc.

454 Moffat Loop

Oviedo, FL 32765

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.

Kristina E. L. Brough

Printed Name of the Person Filing

Signature of the Person Filing

Fee: No charge if included with Articles of Dissolution. If filed separately \$35.00