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	Requestor's Name)
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(Address)
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	Address)
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(City/State/Zip/Phone #)
PICK-UP	WAIT MAIL
	Business Entity Name)
(Document Number)
Certified Copies	Certificates of Status
Special Instructions	to Filing Officer:
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	Office Use Only



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MR

DEC 29 2014

R. WHITE

COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: PERONUS, INC.	<u> </u>
DOCUMENT NUMBER: P100000885	556
The enclosed Articles of Dissolution and fee are s	ubmitted for filing.
Please return all correspondence concerning this m	atter to the following:
John Paulich III, Esq.	
(Name of Contact	Person)
GrayRobinson, P.a.	
(Firm/Comp	any)
8889 Pelican Bay Boulevard	d, Suite 400
(Address)	
Naples, Florida 34108	
(City/State and Z	Cip Code)
For further information concerning this matter, plea	ase call:
	(239) 598-3601
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
Certificate of Status Certi (Add	75 Filing Fee & \$\square\$ \$\\$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 SPERONUS, INC.	tate:		
SECOND:	The document number of the corporation (if known): P10000088556			
THIRD:	The date dissolution was authorized: December 12, 2014			
	Effective date of dissolution if applicable: December 31, 2014 (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 was sufficient for approval.	dissolut	tion	
	☐ Dissolution was approved by the shareholders through voting groups.	: 1		
	The following statement must be separately provided for each voting group entite to vote separately on the plan to dissolve:	lled DEC 2		
	The number of votes cast for dissolution was sufficient for approval by	- ω - - - - - - - - - -		
	(voting group)	3: 14		
	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)			
	Hakan Saltin			
	(Typed or printed name of person signing)			
	President			
	(Title of person signing)			

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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: PERONUS, 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;				
1. Name, Address, Contact Phone Number.				
2. The dollar amount of the claim				
3. The circumstances under which the claim arose.				
4. Any written proof of the claim.				
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)				
c/o John Paulich III, Esq.				
GrayRobinson, P.A.				
8889 Pelican Bay Boulevard, Suite 400				
Naples, Florida 34108				
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.				

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

Hakan Saltin

Printed Name of the Person Filing