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(Red	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: AIKA EXPRESS GROUP INC	
DOCUMENT NUMBER: P11000009251	
The enclosed Articles of Dissolution and fee are submitted f	for filing.
Please return all correspondence concerning this matter to the	e following:
OLIVER LINGSTUYL	
(Name of Contact Person)	
est filment.	िसम्बाह्मा का अवेद ल
(Firm/Company) 1500 NW 79 AVENUE	
(Address)	
DORAL, FL 33126	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
OLIVER LINGSTUYL at (305 (Area of Contact Person)) 456-5047 Code & Daytime Telephone Number)
(Alea)	Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
✓\$35 Filing Fee ☐\$43.75 Filing Fee & ☐\$43.75 Filing Certificate of Status Certified Copy (Additional copenclosed)	Certificate of Status &
MAILING ADDRESS: Amendment Section Division of CorporationsP.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: The name of the corporation as currently filed with the Florida Department of State: FIRST: AIKA EXPRESS GROUP INC The document number of the corporation (if known): P11000009251 SECOND: The date dissolution was authorized: 08/15/2012 THIRD: 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 castifor 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 entitled to vote separately on the plan to dissolve: The number of votes cast for dissolution was sufficient for approval by (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) OLIVER LINGSTUYL (Typed or printed name of person signing) PRES.

Filing Fee: \$35

(Title of person signing)

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: AIKA EXPRESS GROUP INC
Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the <i>Articles of Dissolution</i> .
Description of information that must be included in a claim:
NAME OF CLAIMANT
ADDRESS OF CLAIMANT
TELEPHONE NUMBER OF CLAIMANT
AMOUNT OF CLAIM
DETAILED DESCRIPTION OF CLAIM
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)
OLIVER LINGSTUYL
1500 NW 79 AVENUE
DORAL, FL 33126
A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commence
within 4 years after the filing of this notice.

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

Signature of the Person Filing

OLIVER LINGSTUYL

Printed Name of the Person Filing