Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : 1200000000019
Phone : (305)552-5973
Fax Number : (305)675-5944

FEB 25 PM 5: (

DISSOLUTION OR WITHDRAWAL

D.A.N.G INC.

| Certificate of Status | 0 |
|-----------------------|---------|
| Certified Copy | 0 |
| Page Count | 02 |
| Estimated Charge | \$35.00 |

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ARTICLES OF DISSOLUTION

| of dissolut | ion: Section 607.1403, Florida Statutes, this Florida profit corporation submits the following artic |
|-------------|--|
| FIRST: | The name of the corporation as currently filed with the Florida Department of State: |
| SECOND: | The document number of the corporation (if known): P15000(087) |
| THIRD: | The date dissolution was authorized: 02-25-2019 |
| | Effective date of dissolution if applicable: |
| FOURTH: | (no more than 90 days after dissolution file date) 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 entitled to vote separately on the plan to dissolve: |
| | The number of votes east for dissolution was sufficient for approval by |
| | (voting group) |
| Si | gnature: (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, hustee, or other court appointed fiduciary, by that fiduciary) |
| | DILAN NAVAMO GOENAGA |
| | |
| | (Title of person signing) |

Filing Fee: \$35