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To:

Division of Corporations

Fax Number

: (850)617-6380

dissolution with

From:

: FRANK, WEINBERG, BLACK, P.L. Account Name

Account Number : I20040000083 Phone : (954)474-8000 Fax Number : (954)474-9850

## DISSOLUTION OR WITHDRAWAL OMNISENSE SYSTEMS USA, INC.

Certificate of Status	0
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Estimated Charge	\$35.00

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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:  Omnisense Systems USA, Inc.					
SECOND:	P20000011427 ne document number of the corporation (if known):					
THIRD:	The date dissolution was authorized:					
	Effective date of dissolution if applicable:					
	(no name than 90 days after dissolution file date)  Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.					
FOURTH:	Dissolution was approved by the shareholders, in the manner required by this chapter and the articles of incorporation.					
	_					
	Mari I					
	Signature:  (By a director, president or other officer - if directors or officers have not been selected, by					
	an incorporator of in the bunds of a receiver, trustee, or other court appointed fiduciary, by that fiduciary)					
<u> </u>	Ken Hing Kah Wah					
	(Typed or printed name of person signing)					
	President					

Filing Fee: \$35

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(Title of person signing)

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Notice	of	Cor	porate	Disso	lution
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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: Omnisense Systems USA, Inc.	
The above named corporation is the subject of dissolution and the	effective date of a dissolution is:
the date Articles of Dissolution are filed by the Florida Department of St	tate
(date filed with the Dept. if date specified)	in the Articles of Dissolution)
Description of information that must be included in a claim:	
A complete description of the claim, including without limitation, the ba	sis of the claim, the cause of the claim, the facts
giving rise to the claim, the alleged amount due and all documentation so	upporting the claim.
<del></del>	
Mailing address where written claims can be sent: (Claims cannot	be sent to the Division of Corporations)
8 Penjuru Lane, Singapore 609189	
<del></del>	
A claim against the above named corporation will be barred unless within 4 years after the filing of this notice.	s a proceeding to enforce the claim is commenced
	Land!
Ken Hing Kah Wah	
Printed Name of the Person Filing	Senature of the Person Filing

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