P20000021590

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

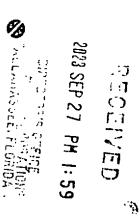


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dissolution



A. RAMSEY SEP 2 9 2023



Incorporating Services, Ltd.

1540 Glenway Drive Tallahassee, FL 32301

850.656.7956

Fax: 850.656.7953 www.incserv.com

e-mail: accounting@incserv.com



ORDER FORM

Florida Department of State TO

,t

The Centre of Tallahassee 2415 North Monroe Street, Suite 810 Tallahassee, FL 32303

corphelp@dos.myflorida.com

850-245-6051

FROM Melissa Moreau

mmoreau@incserv.com

850.656.7953

REQUEST DATE 9/26/2023

PRIORITY Regular Approval

OUR REF # (Order ID#): 1182040

1

ORDER ENTITY

KANDIES WORLD, INC.

PLEASE PERFORM THE FOLLOWING SERVICES:

KANDIES WORLD, INC. (FL)

File the attached dissolution document and provide a certified copy and certificate of status.

NOTES:

\$52.50.00 Authorized

RETURN/FORWARDING INSTRUCTIONS:

ACCOUNT NUMBER: 120050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Sincerely,

Please bill us for your services and be sure to include our reference number on the invoice and courier package if applicable. For UCC orders, please include the thru date on the results.

COVER LETTER

TO: Amendment Section **Division of Corporations**

CHID IT'Z'T'.	DIES WORLD, INC.	· · · · · · · · · · · · · · · · · · ·		
DOCUMENT NU	P20000021590 JMBER:			
The enclosed Arti	cles of Dissolution and f	ee are submitted for filing	ļ.	
Please return all co	orrespondence concerning	g this matter to the follow	ing:	
Stephania Fahmi				
	(Name of	Contact Person)		
Altro LLP				
(Firm/Company)				
300-155 University A	evenue			
	(A	ddress)		
Toronto, Ontario, Car	nada, M5H 3B7			
	(City/Sta	te and Zip Code)		
For further inform	ation concerning this made	tter, please call:		
Stephania Fahmi		at (
(Name	of Contact Person)		(Daytime Telephone Number)	
Enclosed is a chee	k for the following amou	nt:		
□ \$35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	☐ \$43.75 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 The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

FILED

2023 SEP 27 AH 8: 58

Pursuant to section 607.1403. Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

rikst:	KANDIES WORLD, INC.		
SECOND:	The document number of the corporation (if known):		
THIRD:	The date dissolution was authorized: September 21, 2023		
	Effective date of dissolution <u>if applicable</u> : (no more 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.		
	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)		
	ERIC HATTEM		
	(Typed or printed name of person signing)		
	President		
	(Title of nerson 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: KANDIES WORLD, INC.	
The above named corporation is the subject of dissolution and	I the effective date of a dissolution is:
(date filed with the Dept. if date spec	cified in the Articles of Dissolution)
Description of information that must be included in a claim:	
Name of the claimant, address and contact information of claimant,	particulars of the claim.
Mailing address where written claims can be sent: (Claims ca 1983 Boulevard Lionel Bertrand	nnot be sent to the Division of Corporations)
Boisbriand QC J7H 1N8	
A claim against the above named corporation will be barred u within 4 years after the filing of this notice.	nless a proceeding to enforce the claim is commenced
ERIC HATTEM	s ERIC ILUTTEM
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