P95000017623

Requestor's Name

KOLIGOLD USA INC.
16051 BLATT BLVD. #102
F?LAUDERDALE, FL. 33326

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

700002291117--9
-09/11/97--01127--001
*****35.00 *****35.00

1. ______ (Corporation Name) ______ (Document #)
2. ______ (Corporation Name) ______ (Document #)
3. ______ (Corporation Name) ______ (Document #)
4. ______ (Corporation Name) ______ (Document #)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA
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☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS	
	Profit
	NonProfit
	Limited Liability
	Domestication
	Other

AMENDMENTS	
	Amendment
	Resignation of R.A., Officer/ Director
	Change of Registered Agent
	Dissolution/Withdrawal
	Merger

OTHER FILINGS	
	Annual Report
	Fictitious Name
	Name Reservation

REGISTRATION/ QUALIFICATION	
	Foreign
	Limited Partnership
	Reinstatement
	Trademark
	Other

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Examiner's Initials	

CR2E031(1/95)

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

August 25, 1997

KOLIGOLD USA INC.
16051 BLATT BLVD., #102
FT. LAUDERDALE, FL 33326

SUBJECT: KOLIGOLD U.S.A., INC
Ref. Number: P95000017623

This will acknowledge receipt of your correspondence which is being returned for the following reason(s):

The fee to file articles of dissolution or a certificate of withdrawal is $35. For each certified copy requested, please add an additional $52.50.

If you have any questions concerning the filing of your document, please call (850) 487-6916.

Carol Mustain
Corporate Specialist

Letter Number: 197A00042754

ARTICLES OF DISSOLUTION

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

FIRST: The name of the corporation is: KOLIGOLD USA, INC.

SECOND: The date dissolution was authorized: 07/16/97.

THIRD: Adoption of Dissolution (check one)

- [x] Dissolution was approved by the shareholders. The number of votes cast for dissolution was sufficient for approval.

- [ ] Dissolution was approved by vote of 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)

Signed this 16 day of JULY, 19 97

Signature ______________________
(By the Chairman or Vice Chairman of the Board, President, or other officer)

HECTOR GUZMAN
(Typed or printed name)

VICE PRESIDENT
(Title)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED AND FILED