

## ARTICLES OF DISSOLUTION

Signature: STEVEN M DEMOOR VICE PRESIDENT

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Electronic Signature of Signing Officer, Director, Incorporator or Authorized Representative

## **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.

Name of Corporation:

WILDLIFE SOLUTIONS, INC.

Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the Articles of Dissolution.

Description of information that must be included in a claim:

CORPORATE OR INDIVIDUAL NAME (INCLUDING ANY FICTITIOUS NAME) TAX IDENTIFICATION NUMBER  
DATE AND DESCRIPTION OF GOODS SOLD OR SERVICES RENDERED COPY OF CONTRACT OR INVOICE

Mailing address where claims can be sent:

PO BOX 95-4114  
LAKE MARY, FL 32795 US

A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

I submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in section 817.155, Florida Statutes.

Signature: STEVEN M DEMOOR

Electronic Signature of the Person Filing