. P97000 106743

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COVER LETTER

TO: Amendment Section Division of Corporations

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

SUBJECT: Dissolution of FKP-US, Inc. pursuant to Florida Statute 607.1403
DOCUMENT NUMBER: P97000106743
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Michael E. Tschupp
(Name of Contact Person)
Feingold & Kam
(Firm/Company)
3300 PGA Boulevard, Suite 410
(Address)
Palm Beach Gardens, FL 33410
(City/State and Zip Code)
For further information concerning this matter, please call:
Michael E. Tschupp at (_561) 630-6727, Ext. 204
(Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
✓ \$35 Filing Fee Status Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional copy is enclosed) Status Certified Copy (Additional copy is enclosed)
MAILING ADDRESS: Amendment Section STREET ADDRESS: Amendment Section

Division of Corporations Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle

ARTICLES OF DISSOLUTION

Pursuant to s	section 607.1403, Florida Statutes, this Florida profit corporation submits the following articles in:
of dissolutio	n: TALLAETAR
FIRST:	The name of the corporation as currently filed with the Florida Department of State: SEE
	FKP-US, Inc.
SECOND:	The document number of the corporation (if known): P97000106743
THIRD:	The date dissolution was authorized: December 13, 2005
	Effective date of dissolution if applicable: December 31, 2005 (no more than 90 days after dissolution file date)
FOURTH:	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 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)
\$	(By tamector, 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)
	Peter Bekkers (Typed or printed name of person signing)
	Director
	(Title of person 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: FKP-US, Inc.
Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the <i>Articles of Dissolution</i> .
Description of information that must be included in a claim:
Reasonable description of claim
Amount of Claim
Any interest obligation
Claimant's contact information
Date of claim accrual
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)
Peter Bekkers
123 N. Congress Avenue, Suite 353
Boynton Beach, FL 33426

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.

Peter Bekkers

Printed Name of the Person Filing

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