

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

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Account Name : NATIONAL CORPORATE RESEARCH,

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DISSOLUTION OR WITHDRAWAL TOPP GROUP, INC.

| Certificate of Status | 0 |
|-----------------------|---------|
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ARTICLES OF DISSOLUTION

Pursuant to section 607,1403, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

| FRS E: | The name of the corporation as currently filed with the Florida Department of | Sinci | |
|---------|---|--|--|
| | TOPP GROUP, INC. | Jul | |
| SECOND: | The document number of the corporation (if known); P99000082790 | | |
| THRD: | The date dissolution was authorized: 17/24 2016 | | |
| | Effective date of dissolution if applicable: 12/31/2015 (no more than 90 days after dissolution for | time de descriptions | |
| | Note: If the date inserted in this block does not meet the applicable statutory filing requirement be listed as the document's effective date on the Department of State's records. | nts, this date will | |
| FOURTH: | Adoption of Dissolution (CHECK ONE) | | |
| | Dissolution was approved by the shareholders. The number of votes east fo was sufficient for approval. | or dissolution | |
| | Dissolution was approved by the shareholders through voting groups. | | |
| | The following statement must be separately provided for each voting group on to vote separately on the plan to dissolve: | titled | |
| | The number of votes east for dissolution was sufficient for approval by | | |
| | | · · · · · · · · · · · · · · · · · · · | |
| | (voling group) | ASS = | |
| | 7.52 | FIL 5 DEC 29 VAC LARY LANASSE | |
| | Signature: (By a director, president or other officer - it directors or officers have not been selected, by | | |
| | an incorporation - if in the hands of a receiver, trustee, or other court appointed lithiciary, by that fiduciary) | CORID, | |
| | Passer & Ruset | | |
| | (Typed or printed name of person signing) | | |
| | e the first stables of the first | | |
| | (Aitle of person signing) | 4 - examinar parent area ing en en en- | |