

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H22000110677 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6380

From:

: ALTON NORTH AMERICA INC. Account Name

Account Number : I2010000010 Phone : (305)393-8662 : (305)397-0323 Fax Number

DISSOLUTION OR WITHDRAWAL MAKEWELL USA INC

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$43.75

C. BRUMBLEY

MAR 2 6 2022

Electronic Filing Menu

Corporate Filing Menu

Help

ARTICLES OF DISSOLUTION of MAKEWELL USA INC

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

FIRST

The name of the corporation as currently filed with the Florida Department of State: MAKEWELL USA INC

SECOND

The document number of the corporation is P20000014609

THIRD

The date dissolution was authorized on March 23rd, 2022

FOURTH

Adoption of Dissolution

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

Signature of President

Franziska Nicolaus 03/23/2022

Printed Name and Date

President

TITLE

2022 HAR 25 ALL

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: MAKEWELL USA INC

Description of information that must be included in a claim:

- 1. Date
- 2. Type
- 3. Amount

Mailing address where claims can be sent:

MakeWell Europe Ltd.

4th Floor Silverstream House

45 Fitzroy Street

London W1T 6EB

United Kingdom

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.

Franziska Nicolaus

Printed Name of the Person Filing

Signature of the Person Filing