## P09000077900

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer		

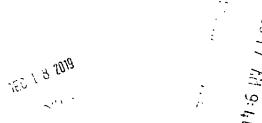
Office Use Only



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CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850~558-1500

ACCOUNT NO. : 12000000195		
REFERENCE : 103761 7729741		
AUTHORIZATION CAPIEL RECENTATION		
COST LIMIT : \$35.00		
ORDER DATE : December 16, 2019		
ORDER TIME : 10:08 AM		
ORDER NO. : 103761-005		
CUSTOMER NO: 7729741		
<u>DOMESTIC FILINGS</u>		
NAME: M3 NORDIC INC.		
XX ARTICLES OF DISSOLUTION		
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:		
CERTIFIED COPY XX PLAIN STAMPED COPY		
CERTIFICATE OF GOOD STANDING		
CONTACT PERSON: Kadesha Roberson - EXT#		
EXAMINER'S INITIALS:		

of dissolution: FIRST: The name of the corporation as currently filed with the Florida Department of State: M3 NORDIC INC. P09000077900 SECOND: The document number of the corporation (if known): The date dissolution was authorized: \_\_\_\_\_\_ THIRD: December 13, 2019 Effective date of dissolution if applicable: (no more than 90 days after dissolution file date) Note: If the date inserted in this block does not meet the applicable statutory filling requirements, this date will not be listed as the document's affective date on the Department of State's records. 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 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) Signature: (By a director, 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) Maria Helene Sahr (Typed or printed name of purson signing)

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

Filing Fee: \$35

Sole Director
(Title of person signing)

## 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: M3 NORDIC INC.	<u> </u>
Date of dissolution will be the date the dissolution is filed w specified in the Articles of Dissolution.	ith the Department of State or as
Description of information that must be included in a claim:	
The following information shall be provided: Name of creditor, a	mount of claim (with interest if applicable)
and a description of the basis of the claim (e.g., goods sold, mone	y loaned, lease, services performed, etc.)
Mailing address where claims can be sent: (Claims cannot be	sent to the Division of Corporations)
Ms. Maria Helene Sahr	
Otte Marsvins Väg 123	
SE-271 93 Ystad, Sweden	
A claim against the above named corporation will be barred within 4 years after the filing of this notice.	unless a proceeding to enforce the claim is commenced
	1//
Maria Helene Sahr	Holand Salm
Printed Name of the Person Filing	Signature of the Person Filing

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