

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: DAY OF BEAUTY INC

DOCUMENT NUMBER: P12000082230

The enclosed **Articles of Dissolution** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

NOEMI ESPINOSA

(Name of Contact Person)

ESP TAX SERVICES

(Firm/Company)

489 SW PORT ST LUCIE BLVD

(Address)

PORT ST LUCIE, FL. 34953

(City/State and Zip Code)

For further information concerning this matter, please call:

NOEMI ESPINOSA

(Name of Contact Person)

at (772) 873-8711

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- \$35 Filing Fee \$43.75 Filing Fee & Certificate of Status \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)

MAILING ADDRESS:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF DISSOLUTION

FILED

2013 NOV -2 PM 3:13

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Pursuant to section 607.1401, 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:

DAY OF BEAUTY, INC

SECOND: The document number of the corporation (if known): P12000082230

THIRD: The file date of the articles of incorporation: 09/28/2012

FOURTH: (CHECK AT LEAST ONE BOX)

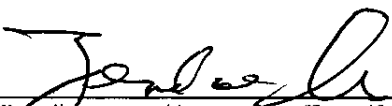
- None of the corporation's shares have been issued.
- The corporation has not commenced business.

FIFTH: No debt of the corporation remains unpaid.

SIXTH: The net assets of the corporation remaining after winding up have been distributed to the shareholders, if shares were issued.

SEVENTH: Adoption of Dissolution (CHECK ONE)

- A majority of the incorporators authorized the dissolution.
- A majority of the directors authorized the dissolution.

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.)

ZENAIDA AROCHA

(Typed or printed name of person signing)

PRESIDENT

(Title of Person Signing)

Filing Fee: \$35