FILED Jun 27, 2013 Secretary of State

ARTICLES OF DISSOLUTION

Pursuant to section 607.1401, Florida Statutes, this Florida corporation submits the following Articles of Dissolution:

FIRST: The name of the corporation as currently filed with the Florida Department of State:

HAIR DIMENSIONS, INC.

SECOND: The document number of the corporation: 489595

THIRD: The file date of the articles of incorporation: November 17, 1975

FOURTH: 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: A majority of the incorporators authorized the dissolution.

I submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in section 817.155, Florida Statutes.

Signature: VINCENZA PALERMO . SEC.

Electronic Signature of Signing Officer, Director, Incorporator or Authorized Representative

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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:

HAIR DIMENSIONS, INC.

Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the Articles of Dissolution.

Description of information that must be included in a claim:

AS OF JUNE 29TH 2013 WE WILL BE CLOSING OUR BUSINES.THAT WE OWENED FOR 38 YEARS HAIR DIMENSIONS INC.AT 3270 N.FEDERAL HWY. BOCA RATON FL.33431

Mailing address where claims can be sent:

1151 S.W. 15TH STREET N/A BOCA RATON ., FL 33486 PB

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.

I submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in section 817.155, Florida Statutes.

Signature: VINCENZA PALERMO.

Electronic Signature of the Person Filing