# -K2496

(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:	
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Office Use Only



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06/05/14--01014--010 \*\*35.00

Month

JUN 17 2014

R. WHITE

# **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: A HAIR PERFORMANCE CUTTERS CORP
DOCUMENT NUMBER: K24926
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
SNORRE BJORHUSDAL
(Name of Contact Person)
A HAIR PERFORMANCE CUTTERS CORP
(Firm/Company)
989 E COMMERCIAL BLVD
(Address)
FT LAUDERDALE, FL 33334
(City/State and Zip Code)
For further information concerning this matter, please call:
SNORRE BJORHUSDAL at (954 ) 504-1787
(Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
□ \$35 Filing Fee □ \$43.75 Filing Fee & Certificate of Status  Certificate of Status  Certified Copy (Additional copy is enclosed)  Certified Copy (Additional copy is enclosed)
MAILING ADDRESS:  Amendment Section  Amendment Section

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Division of Corporations Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF DISSOLUTION

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 A HAIR PERFORMANCE CUTTERS CORP	State:		
SECOND:	The document number of the corporation (if known): K24926			
ΓHIRD:	The file date of the articles of incorporation: 05/27/1988			
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.	ited		
SEVENTH	: Adoption of Dissolution (CHECK ONE)	3 <b>►</b> 3 <u>-</u> 2 -	· ·	
	A majority of the incorporators authorized the dissolution.	:	; ;	•
	☐ A majority of the directors authorized the dissolution.		ः .э ===================================	

(By a director, president or other other - 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.)

# **SNORRES BJORHUSDAL**

(Typed or printed name of person signing)

# **PRESIDENT**

(Title of Person Signing)

Filing Fee: \$35

### **Notice of Corporate Dissolution**

This notice is submitted by the dissolved corporation named below for resolution of payment of unknown claims

This "Notice of Corporate Dissolution" is optional and is not required when filing a voluntary dissolution
Name of Corporation: A HAIR PERFORMANCE CUTTERS CORP
Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the <i>Articles of Dissolution</i> .
Description of information that must be included in a claim:
CORPORATION IS GOING OUT OF BUSINESS AS OF MAY 31, 2014
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

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.

2685 E OAKLAND PARK BLVD

FT LAUDERDALE, FL 33306

SNORRE BJORHUSDAL

against this corporation as provided in s. 607.1407, F.S.

Printed Name of the Person Filing

S. Sicaland Supplier School Filing

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