405000017529

-	(Requestor's Name)	
	(Address)	
	(Address)	
	(City/State/Zip/Phone #)	
PICK-L	JP WAIT	MAIL
-#. : Z - L.	(Business Entity Name)	
	(Document Number)	
adified Copies	Certificates of	Status
Special Instruction	ns to Filing Officer:	
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····	Office Use Only	



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COVER LETTER

TO	O: Registration Section Division of Corporations	
st	UBJECT: Mastaphre Pauls and Skingare, LLC (Name of Limited Liability Company)	
	(Name of Different Samples)	
, Th	he enclosed Articles of Amendment and fee(s) are submitted for filing.	
Ple	lease return all correspondence concerning this matter to the following:	
	Patricia L Compton	
· ·	(Name of Person)	700 05
	_	跨与
-	- 	ちて下
	(Firm/Company)	
	4 Panshire Lane	
	4 Ranshire Lane	SES
	Palm (oast FL. 32164 (City/State and Zip Code)	DA
	talm (00), FL. 32164	
	(City/State and Zip Code)	
Fo	or further information concerning this matter, please call:	
· _	Patricia Compton at 386, 437-8439	
· <u>~</u>	(Name of Person) (Area Code & Daytime Telephone Number)	
_ En	nclosed is a check for the following amount:	
Z	\$25.00 Filing Fee \$\ \$\$\$ \$30.00 Filing Fee & \tag{\$\$\$ \$55.00 Filing Fee & \tag{\$\$\$ \$\$\$ \$\$\$ \$\$\$ \$\$ \$\$\$ \$\$\$ \$\$\$ \$\$\$ \$\$\$	
*.	(additional copy is enclosed) Certified Copy	
_	(additional copy is	enciosea)
-	MAILING ADDRESS: STREET/COURIER ADDRESS:	
_	Registration Section Registration Section	
	Division of Corporations P.O. Box 6327 Division of Corporations Clifton Building	
	P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle	
•	Tallahassee, FL 32301	

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

	1. The name of a limited liability company is
	- Masterprece nails and Skincare, LLC
	2. The Articles of Organization were filed on 2-21-2005 and assigned document number L05000017529.
	3. The date the dissolution was approved: <u>Doc. 31, 2005</u> .
	4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 608.441, Florida Statutes, (copy 608.441 on back cover letter).
	Single member-will change statis to Sole Propriet
_	if I decide to continue as self employed.
•	
	5. CHECK ONE:
	All debts, obligations and liabilities of the limited liability company have been paid or discharged. OR-
	Adequate provision has been made for the debts, obligations and liabilities pursuant to s. 608.4421.
	All remaining property and assets have been distributed among its members in accordance with their respective rights and interests.
	7. CHECK ONE:
	There are no suits pending against the company in any court.
-	Adequate provision has been made for the satisfaction of any judgment, order or decree which may be entered against it in any pending suit.
Si	gnatures of the members having the same percentage of membership interests necessary to approve the dissolution:
	Signature Printed Name
	Patricia Compton

FILING FEE: \$25.00