L01000015024

| (Re | questor's Name) | |
|-------------------------|--------------------|-------------|
| (Ad | dress) | |
| (Ad | idress) | |
| (Cit | ty/State/Zip/Phone | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bu | ısiness Entity Nar | ne) |
| (Do | ocument Number) | |
| Certified Copies | _ Certificates | s of Status |
| Special Instructions to | Filing Officer: | |
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| | | |

Office Use Only



700256979087

02/27/14--01003--005 **25.00

2014 FEB 27 PM 12: 4-6 SECKETARY OF STATE TALLARIASSEE, FLORIDA

COVER LETTER

TO:

Registration Section Division of Corporations

| • | , |
|--|---|
| The enclosed Articles of Dissolution and fee(s) are submitted for filin | ng. |
| Please return all correspondence concerning this matter to the following | ing: |
| Minlan ZHou (Name of Person | n) |
| MIN Wax cente | re SPA UC |
| 4062 Inversary | Dr |
| MIN Wax center (Firm/Company) 4062 Invertary (Address) Laudethill FL 2 (City/State and Zip C | 23319 Code) |
| For further information concerning this matter, please call: | |
| Min an ZHOU at (Name of Person) | (Area Code & Daytime Telephone Number) |
| Enclosed is a check for the following amount: | |
| \$25.00 Filing Fee and Certificate of Dissolution | \$55.00 Filing Fee, Certificate of Dissolution & Certified Copy (additional copy is enclosed) |
| MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 | STREET/COURIER ADDRESS: Registration Section Division of Corporations Cliffon Building |

Tallahassee, FL 32314

2661 Executive Center Circle

Tallahassee, FL 32301

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

FILED

| | TENHILD DINDIDITI COMITALI |
|-----------|--|
| | The name of a limited liability company is MIN WAX CENTER & SPASICILIARY OF STATE JALLAHASSEE, FLORIDA |
| 2. | The Articles of Organization were filed on 119/07 and assigned document number L010000 7502-4 |
| 3. | The delayed effective date the dissolution if not effective on the date of filing: |
| 4. | A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 605.0707, Florida Statutes, (copy 605.0707 on back cover letter). |
| - | company is 12-31/13 closed. |
| | If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs: MINION ZHOU |
| 6. abo | Signature of an authorized person or if there are no members, the signature of the person appointed and listed ove to wind up the company's activities and affairs: |
| | Signature Printed Name |
| - | Minlan ZHOU |
| | |

FILING FEE: \$25.00

2/25/14