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PICK-UP WAIT MAIL	
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Special Instructions to Filing Officer:	l
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SECRETARY OF STATE
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COVER LETTER

TO: Amendment Section

Tallahassee, FL 32314

Division of Corporations	
SUBJECT: Dissolution of NEW SKIN LIFE, INC.	
DOCUMENT NUMBER: M63804	
The enclosed Articles of Dissolution and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following	: ·
Ralph Aguila	
(Name of Contact Person)	
(Firm/Company)	
*1172*South Dixie∘Highway, Suite 485	
(Address)	
Coral Gables, FL 33146-2918	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
	7268
(Name of Contact Person) (Area Code & Da	ytime Telephone Number)
Enclosed is a check for the following amount:	
(Additional copy is enclosed)	\$52.50 Filing Fee, Certificate of Status & Certified Copy Additional copy is enclosed)
	ADDRESS: ent Section
	ent Section of Corporations
P.O. Box 6327 Clifton B	

2661 Executive Center Circle

Tallahassee, FL 32301

	ARTICLES OF DISSOLUTION FILED
Pursuant to of dissolution	section 607.1403, Florida Statutes, this Florida profit corporation submits the following articles on: SECRETARY OF STATE The name of the corporation as currently filed with the Florida Department of STATE
FIRST:	The name of the corporation as currently filed with the Florida Department of State: 104
	NEW SKIN LIFE, INC.
SECOND:	The document number of the corporation (if known): M63804
THIRD:	The date dissolution was authorized: 10/04/2007
	Effective date of dissolution if applicable: 10-09-199 (no more than 90 days after dissolution file date)
OURTH:	Adoption of Dissolution (CHECK ONE)
	Dissolution was approved by the shareholders. The number of votes cast for dissolution was sufficient for approval.
	Dissolution was approved by the shareholders through voting groups.
	The following statement must be separately provided for each voting group entitled to vote separately on the plan to dissolve:
	The number of votes cast for dissolution was sufficient for approval by
	(voting group)
\$	Signature: Caricles Oguida. (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)
	Emilia Aguila (Typed or printed name of person signing)
:	Director
	(Title of paragraphics)

Filing Fee: \$35