

**ALBRITTON**

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Dissolution of Non profit 501-C3 Sacred Hands Studio

**DOCUMENT NUMBER:** N02000000609

The enclosed **Articles of Dissolution** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Shella Black

(Name of Contact Person)

Sacred Hands Studio, Inc.

(Firm/Company)

71 Tranquility Lane

(Address)

Destin, FL 32541

(City/State and Zip Code)

For further information concerning this matter, please call:

Shella Black

(Name of Contact Person)

850

(Area Code)

650-0988

(Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☒ \$35 Filing Fee    ☐ \$43.75 Filing Fee & Certificate of Status    ☐ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)    ☐ \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)

**MAILING ADDRESS:**

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**STREET ADDRESS:**

Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

June 18, 2015

SHELLA BLACK  
SACRED HANDS STUDIO, INC.  
71 TRANQUILITY LANE  
DESTIN, FL 32541

SUBJECT: SACRED HANDS STUDIO, INC.  
Ref. Number: N02000000609

We have received your document for SACRED HANDS STUDIO, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must have original signatures.

You failed to sign the document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton  
Regulatory Specialist II

Letter Number: 615A00012812

RECEIVED  
JUL - 1 11:38  
DEPARTMENT OF STATE  
DIV OF CORPORATIONS  
TALLAHASSEE, FLORIDA

## ARTICLES OF DISSOLUTION

Pursuant to section 617.1403, Florida Statutes, this Florida not for profit corporation submits the following Articles of Dissolution:

FIRST: The name of the corporation as currently filed with the Florida Department of State:  
Sacred Hands Studio, Inc.

SECOND: The document number of the corporation (if known): N02000000609

THIRD: Adoption of Dissolution  
**(COMPLETE SECTION I OR II)**

### SECTION I

If the corporation has members entitled to vote:

(CHECK/COMPLETE ONE)

☐ The date of meeting of members at which the resolution to dissolve was adopted

\_\_\_\_\_. The number of votes cast by the members was sufficient for approval.

☐ The resolution was adopted by written consent of the members and executed in accordance with section 617.0701, Florida Statutes.

### SECTION II

If the corporation has no members or members entitled to vote on the dissolution:

The corporation has no members or members entitled to vote on the dissolution.

The date of adoption of the resolution by the board of directors was 6

The number of directors in office was 6 and the vote for resolution was 6 for and 0 against. (Must be a majority vote)

FOURTH Effective date of dissolution, if applicable: June 1, 2015  
(no more than 90 days after dissolution file date)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Signature: \_\_\_\_\_

(By the chairman or vice chairman of the board, president or other officer- if directors have not been selected, by an incorporator- if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary).

Shella Black

(Typed or printed name of person signing)

Artist Founder

(Title of person signing)

Filing Fee: \$35

RECEIVED  
DIVISION OF REVENUE  
2015 JUL - 1 AM 9:17