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COVER LETTER

TO: Amendment Section Division of Corporations

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SUBJECT: DISSOLUTION
DOCUMENT NUMBER: P01000092464
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
LESLIE JOVANOVIC
(Name of Contact Person)
FAUX FINISHES BY LEGENDS, INC.
(Firm/Company)
6538 COLLINS AVENUE SUITE #248
(Address)
MIAMI BEACH, FL 33141
(City/State and Zip Code)
FOLUE 10\/ANO\/IC 205 000 000
LESLIE JOVANOVIC at 305 992-0282
(Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
□ \$35 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) □ \$43.75 Filing Fee & Certificate of Status & Certified Copy (Additional copy is enclosed)
MAILING ADDRESS: Amendment Section Amendment Section Amendment Section

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

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

ARTICLES OF DISSOLUTION

Pursuant to section 607.1403, 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 State: FAUX FINISHES BY LEGEND, INC.
SECOND:	The document number of the corporation (if known): P01000092464
THIRD:	The date dissolution was authorized: 12/16/13
min.	Effective date of dissolution if applicable: 12/31/13
	(no more than 90 days after dissolution file date)
FOURTH:	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)
	(voting group) Signature: (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)
	LESLIE JOVANOVIC
	(Typed or printed name of person signing)
	DIRECTOR
	(Title of person signing)

Filing Fee: \$35