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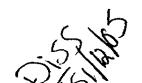
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TO: Amendment Section

TRANSMITTAL LETTER

Division of Corporations
SUBJECT: CORPORATE DISSOLUTION OF RENAISSANCE HAIR & NAIL EXPERIENCE.INC
DOCUMENT NUMBER: P02000038128
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
DONNA L. LEWIS
(Name of Person)
RENAISSANCE HAIR & NAIL EXPERIENCE, INC. (Name of Firm/Company)
6318 LANTANA ROAD (Address)
LAKE WORTH, FL 33463 (City/State/and Zip Code)
For further information concerning this matter, please call:
DONNA L. LEWIS at (561) 439-7736
(Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
■ \$35 Filing Fee
MAILING ADDRESS:STREET ADDRESS:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327409 E. Gaines StreetTallahassee, Florida 32314Tallahassee, Florida 32399

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 con	poration as currently filed with	the Department of State) :	
	RENAISSANCE HAI	R & NAIL EXPERIENCE, INC.		,	
SECOND:	The document number of the corporation (if known): P02000038128				
THIRD:	The date dissolution	was authorized: 01/03/2005			
	Effective date of dis	solution <u>if applicable</u> : 01/03/20 (no more	005 than 90 days after dissolution f	ile date)	
FOURTH:	Adoption of Dissolu	ution (CHECK ONE)			
	Dissolution was was sufficient for	approved by the shareholders. or approval.	The number of votes ca	st for dissolution	t
	☐ Dissolution was	approved by of the shareholder	rs through voting groups	i -	
		tatement must be separately pro on the plan to dissolve:	vided for each voting gr	oup entitled to	
	The number of	votes cast for dissolution was su	officient for approval by		
		(voting group)		Ç) ,
	Signed this 4TH	day of JANUARY	, 2005	- 33	~ =
Signat	nure:	e Dem		्रमं ⊝्रा	FILED
	(By a director, presider if in the hands of a rec	nt or other officers if differents or officers elver, trustee, or other court appointed fid	have not been selected, by an in unitary, by that fiduciary)	T S S S S S S S S S S S S S S S S S S S	-
	DONNA L				;
		(Typed or printed name of person sig	ning)		
	PRES				
	-	(Title of person signing)			

Filing Fee: \$35