## P03000071460

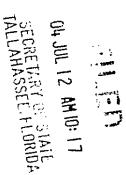
(Rec	uestor's Name)	
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(City,	/State/Zip/Phone	<del>&gt; #</del> )
PICK-UP	WAIT	MAIL
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Certified Copies	Certificates	of Status
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V62015

## TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations	
SUBJECT:	
DOCUMENT NUMBER: PO3000	021460
The enclosed Articles of Dissolution and fee are submi	tted for filing.
Please return all correspondence concerning this matter	to the following:
Lorraire Martin (Name of Person)	<del></del>
,	
Nature Perfect (Name of Firm/Compa	Troc -
15346 81St Textrac (Address)	e North
Palm Beach Carder (City/State/and Zip	S F2 33418 Code)
For further information concerning this matter, please ca	all:
Lorraine Mentin at (5 (Name of Person) (Area	a Code & Daytime Telephone Number
Enclosed is a check for the following amount:	
\$35 Filing Fee \$\Bigcup \$43.75 Filing Fee & Certified (Additiona enclosed)	Copy Certificate of Status & Certified Copy
MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	STREET ADDRESS: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, 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 corporation as currently filed with the Department of State:
	Nature Perfect Inc.
SECOND:	The document number of the corporation (if known): PO300011460
THIRD:	The date dissolution was authorized:
	Effective date of dissolution if applicable:
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 of 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
	TALL SEC
	(voting group)
	Signed this 1st day of July . 2004. REFU
Signatu	re: Lovaire P. Mati
	(By a director, president or other officer - if directors or officers have not been selected, by an i neorpolator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary)
	(Typed or printed name of person signing)
	(Title of person signing)

Filing Fee: \$35