P03000122767

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SECRETARY OF STATE
ALLAMASSEE EL CARE

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Cosmetology School Consulting Services, Unc.
DOCUMENT NUMBER: \$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Marisa D. Crane (Name of Person)
(Name of Person)
(Name of Firm/Company) 3721 Oakwood Dr. (Address)
(Address) 2 ephyrhills H 33543 (City/State/and Zip Code)
For further information concerning this matter, please call:
Mariga D. Crane at (813) 779-9811 (Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$35 Filing Fee \$43.75 Filing Fee \$ \$43.75 Filing Fee \$ \$52.50 Filing Fee, Certificate of Status Certified Copy Certificate of Status & Certified Copy (Additional copy is enclosed) (Additional copy is enclosed)
MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327 STREET ADDRESS: Amendment Section Division of Corporations 409 E. Gaines Street

Tallahassee, Florida 32314

Tallahassee, Florida 32399

ARTICLES OF DISSOLUTION FILED
Pursuant to section 607.1401, Florida Statutes, this Florida profit corporation submits the Hollowing articles of dissolution: ALLAHASSEE, FLORIDA
FIRST: The name of the corporation as currently filed with the Florida Department of State: COS mc to logy School Consulting Services, de
SECOND: The document number of the corporation (if known): P03000122767
THIRD: The file date the articles of incorporation:
FOURTH: (CHECK AT LEAST ONE BOX)
None of the corporation's shares have been issued.
The corporation has not commenced business.
FIFTH: No debt of the corporation remains unpaid.
SIXTH: The net assets of the corporation remaining after winding up have been distributed to the shareholders, if shares were issued.
SEVENTH: Adoption of Dissolution (CHECK ONE)
A majority of the incorporators authorized the dissolution.
A majority of the directors authorized the dissolution.
Signed this 4th day of Opril 2005
Signature: Vama Care
(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.)
Marisa D. Crane (Typed or printed name of person signing)
I NCORPORATOR

Filing Fee: \$35