Po4000/33485

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nar	ne)
(Document Number)		
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	





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SECRETARY OF STATE
AND ANASSEE FLORIDA

COVER LETTER

TO: Amendment Section Division of Corporations		
subject: Femme Design	5 Carp.	
DOCUMENT NUMBER: PO4000	133485	
The enclosed Articles of Dissolution and fee	are submitted for filing.	
Please return all correspondence concerning the	nis matter to the following:	
Vane of Co	Duque	
	·	
tenme Designs Corp. (Firm/Company)		
	4	
6900 W. 32 Av	e 13ay # H ress)	
Hideah, Fl 35 (City/State)		
(City/State a	and Zip Code)	
For further information concerning this matter	r, please call:	
(Name of Contact Person)	at (<u>786</u>) <u>859-9968</u> (Area Code & Daytime Telephone Number)	
Enclosed is a check for the following amount:		
Certificate of Status	\$43.75 Filing Fee & \$\sum \$52.50 Filing Fee, Certified Copy Certificate of Status & Certified Copy enclosed) Certified Copy (Additional copy is enclosed)	
MAILING ADDRESS:	STREET ADDRESS:	
Amendment Section Division of Corporations	Amendment Section Division of Corporations	
P.O. Box 6327	Clifton Building	
Tallahassee, FL 32314	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:
	Femme Designs Corporation
SECOND:	The document number of the corporation (if known): PO 4000 133 485
THIRD:	The date dissolution was authorized:
	Effective date of dissolution if applicable: (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
	O7 AF
	(voting group) (voting group)
	Color : Color
	Signature: Armout 29
	(By a director, president of 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)
	(Typed or printed name of person signing)
	Prosident
	(Title of person signing)

Filing Fee: \$35