PHW0139673

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP	☐ WAIT	MAIL .
(Business Entity Name)		
(Document Number)		
Certified Copies	_ Certificates	s of Status
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SECRETARY OF STATE
TALLIAHASSEE FLORIDA

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Dissolution of Fashion Etc. Company DOCUMENT NUMBER: P04000139673			
			The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this	matter to the following:		
Carol Nicholson			
(Name of Conta	ct Person)		
(Firm/Company)			
1015 Atlantic Blvd #403			
(Address)			
Atlantic Beach, FL 32233			
(City/State and	Zip Code)		
For further information concerning this matter, p	iease call:		
	at (_904) 710-7499		
(Name of Contact Person)	(Area Code & Daytime Telephone Number)		
Enclosed is a check for the following amount:			
(A d	3.75 Filing Fee & \$\sum \\$52.50 Filing Fee, rtified Copy		
MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	STREET ADDRESS: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle		

Tallahassee, FL 32301

ARTICLES OF DISSOLUTION

Pursuant to section 607.1401, Florida Statutes, this Florida profit corporation submits the following articles of dissolution: The name of the corporation as currently filed with the Florida Department of State: FIRST: Fashion Etc. Company The document number of the corporation (if known): P04000139673 SECOND: The file date of the articles of incorporation: THIRD: (CHECK AT LEAST ONE BOX) FOURTH: 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. Signature: (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.) CAROL J. NICHOLSON

(Typed or printed name of person signing)

President

Filing Fee: \$35

(Title of Person Signing)