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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: DISSOLUTION of UGUE HAIR DESIGNE
DOCUMENT NUMBER: PO 5 0000 59 12 7
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
SERGIO ORtiz
(Name of Contact Person)
VOGUE HAIR DESIGNERS, INC (Firm/Company)
3226 VAN BUREN St.
(Address)
Holly wood, Floriba 33021 (City/State and Zip Code)
(City/State and Zip Code)
For further information concerning this matter, please call:
S=76:0 Optiz at (954) 554-7799
(Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
S35 Filing Fee S43.75 Filing Fee & S43.75 Filing Fee & S52.50 Filing Fee, Certificate of Status Certified Copy Certificate of Status & Certified Copy (Additional copy is enclosed) (Additional copy is enclosed)
MAILING ADDRESS: STREET ADDRESS:

Amendment Section

Clifton Building

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Amendment Section

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32314

ARTICLES OF DISSOLUTION

Pursuant to section 607.1401, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

e name of the corporation as currently filed with the Florida Department of State:
VOGUE HAIR DESIGNERS, INC.
te document number of the corporation (if known): P05000059 127
the file date the articles of incorporation: $04/21/2005$
CHECK AT LEAST ONE BOX)
None of the corporation's shares have been issued.
☐ The corporation has not commenced business.
debt of the corporation remains unpaid.
e net assets of the corporation remaining after winding up have been distributed he shareholders, if shares were issued.
Adoption of Dissolution (CHECK ONE)
☐ A majority of the incorporators authorized the dissolution.
A majority of the directors authorized the dissolution.
(By a director, proceed at or other officer of 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.) Service Order (Typed or printed name of person signing) President (Title of Person Signing)

Filing Fee: \$35