

PO5000111666

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

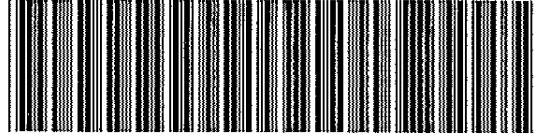
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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*dis*

FILED  
2006 NOV -3 AM 11:29  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

RECEIVED  
2006 NOV -3 AM 11:01  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TO ASSESS JUDGE  
SUFFICIENCY OF FILING

*102*  
*11/3/06*



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 546607 7497972

AUTHORIZATION :

COST LIMIT : \$ 35.00

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ORDER DATE : October 23, 2006

ORDER TIME : 10:43 AM

ORDER NO. : 546607-010

CUSTOMER NO: 7497972  
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DOMESTIC FILINGS

NAME: DESIREE DAY SPA, INC.

XX ARTICLES OF DISSOLUTION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Pamela A Washington - EXT# 2936

EXAMINER'S INITIALS: \_\_\_\_\_

FILED

ARTICLES OF DISSOLUTION

2006 NOV -3 AM 11:29

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

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FIRST: The name of the corporation as currently filed with the Florida Department of State:

DESIREE DAY SPA, INC.

SECOND: The document number of the corporation (if known): P05000111666

THIRD: The file date the articles of incorporation: AUGUST 11, 2005

FOURTH: (CHECK AT LEAST ONE BOX)

☒ None of the corporation's shares have been issued.

☒ The corporation has not commenced business.

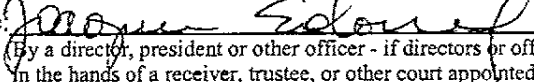
FIFTH: No debt of the corporation remains unpaid.

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.

Signature:   
(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.)

JOAQUINE EDOUARD

(Typed or printed name of person signing)

DIRECTOR

(Title of Person Signing)

Filing Fee: \$35