

PO5000133135

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(Address)

(Address)

(City/State/Zip/Phone #)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Dissolution of Haven SkinCare Inc.

DOCUMENT NUMBER: P05000133135

The enclosed **Articles of Dissolution** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Nora Lynn Hersey
(Name of Contact Person)

(Firm/Company)

10908 158th St N

(Address)

Jupiter, FL 33478
(City/State and Zip Code)

For further information concerning this matter, please call:

Nora Hersey at (561) 632-1031
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☐ \$35 Filing Fee ☒ \$43.75 Filing Fee & Certificate of Status ☐ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) ☐ \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 5, 2009

NORA LYNN HERSEY
10908 158TH ST N
JUPITER, FL 33478

SUBJECT: HAVEN SKIN CARE, INC.
Ref. Number: P05000133135

We have received your document for HAVEN SKIN CARE, INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must have original signatures.

Photo copies are not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6964.

Irene Albritton
Regulatory Specialist II

Letter Number: 809A00004168

Dear Irene,

*This is the correct form.
Thank you. Sorry for the
mix up.*

Nora Hersey

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:

Haven Skin Care Inc

SECOND: The document number of the corporation (if known): PD5000133135

THIRD: The date dissolution was authorized: 12-31-2008

Effective date of dissolution if applicable: 1-01-2009
(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

(voting group)

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)

Nora Lynn Hersey
(Typed or printed name of person signing)

President
(Title of person signing)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
09 FEB 18 PM 3:51

Filing Fee: \$35