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(Requestor's Name)
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(Address)
· (City/State/Zip/Phone #)
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SECRETARY OF STATE
TALLAHASSEE, FLORID

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COVER LETTER

'TO: Amendment Section

Division of Corporations		
SUBJECT: Dissolution of Lady D,S Inc.		
DOCUMENT NUMBER: P0600002130		
The enclosed Articles of Dissolution and fee are submitted for	or filing.	
Please return all correspondence concerning this matter to the	following:	
DIANNA L PERRY		
(Name of Contact Person)		
LADY D'S INC.		
. (Firm/Company)		
1118 SW 12TH TERRACE		
(Address)	The second secon	
CAPE CORAL FL 33991	, ,	
(City/State and Zip Code)	•	
For further information concerning this matter, please call:		
DIANNA L PERRY (Name of Contact Person) at (239) 242-0504 (Area Code & Daytime Telephone Number)		
	code & Daytime Telephone Number)	
Enclosed is a check for the following amount:	•	
□\$35 Filing Fee ☑\$43.75 Filing Fee & □\$43.75 Filing F Certificate of Status Certified Copy (Additional copy enclosed)	Fee & S52.50 Filing Fee, Certificate of Status & y is 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	

ARTICLES OF DISSOLUTION

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branch of State:

Pursuant to articles of di	section 607.1401, Florida Statutes, this Florida profit corporation subfacts the following issolution:
FIRST:	The name of the corporation as currently filed with the Florida Department of State:
	LADY D'S, INC.
SECOND:	The document number of the corporation (if known): P0600002130
THIRD:	The file date of the articles of incorporation: 01/02/2006
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.
	•
Sign	(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 fiductary, by that fiduciary.)
	DIANNA L PERRY
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of Person Signing)

Filing Fee: \$35

Notice of Corporate Dissolution

This notice is submitted by the dissolved corporation named below for resolution of payment of unknown claims against this corporation as provided in s. 607.1407, F.S. This "Notice of Corporate Dissolution" is optional and is not required when filing a voluntary dissolution. Name of Corporation:_LADY D'S, INC. Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the Articles of Dissolution. Description of information that must be included in a claim: CORPORATION DID NOT TAKE OFF NO SALES WERE MADE. Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations) 1118 SW 12TH TERRACE CAPE CORAL FL 33991 A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice. DIANNA L PERRY Printed Name of the Person Filing

Fee: No charge if included with Articles of Dissolution. If filed separately \$35.00