## Polocoo69340

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## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: Dissolution of a Corporation
DOCUMENT NUMBER: PO600069340
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Shannon Meyer (Name of Contact Person)
Hair Moment Inc. (Firm/Company)
3450 Cindy Cr (Address)
Titusville FL 32796  (City/State and Zip Code)
(Chy/State and Zip Code)
For further information concerning this matter, please call:
Shannon Meyer at (321) 759-8333  (Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
S35 Filing Fee \$\Bigsquare \text{\$\frac{1}{2}\$\$43.75 Filing Fee & \$\Bigsquare \text{\$\frac{1}{2}\$\$\$\$43.75 Filing Fee & \$\Bigsquare \text{\$\frac{1}{2}\$\$\$\$\$\$\$\$\$\$\$Certified Copy (Additional copy is enclosed) (Additional copy is enclosed)
MAILING ADDRESS: Amendment Section  STREET ADDRESS: Amendment Section
Division of Corporations Division of Corporations
P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle
Tallahassee, FL 32314  Tallahassee, FL 32301

## ARTICLES OF DISSOLUTION Pursuant to section 607.1403, Florida Statutes, this Florida profit corporation submits the fo of dissolution: FIRST: The name of the corporation as currently filed with the Florida Department A Hair Moment, Inc. SECOND: The document number of the corporation (if known): POW 0000 69340 THIRD: The date dissolution was authorized: 3-31-08 Effective date of dissolution if applicable: 4-1-08 (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 Shannon Meyer President Signature: an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary) Shannon M. Meyer (Typed or printed name of person signing)

Filing Fee: \$35

President