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· (Re	equestor's Name)	
<i>(,</i>		
(Ac	ldress)	
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(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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SECNETARY OF STATE
ALLAHASSEE, F. SAIE

COVER LETTER

TO: Amendment Section
Division of Corporations

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

•	
SUBJECT: Dissolution	
document number: P0600	00151013
The enclosed Articles of Dissolution and fe	ee are submitted for filing.
Please return all correspondence concerning	g this matter to the following:
Vanessa W	Contact Person)
	osis Tattoo Fic.
401 KAtherine	St.
South Dayton,	4 Fl. 32119 te and Zip Code)
For further information concerning this mat	tter, please call:
Vanessa Wine (Name of Contact Person)	S at (386) 527-0504 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amou	nt:
\$35 Filing Fee \$43.75 Filing Fee & Certificate of Status	□ \$43.75 Filing Fee & □ \$52.50 Filing Fee, Certified Copy (Additional copy is enclosed) □ \$43.75 Filing Fee & Certificate of Status & Certified Copy (Additional copy is enclosed)
MAILING ADDRESS: Amendment Section	STREET ADDRESS: Amendment Section

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building



Pursuant to section 607.1401, 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:
	Metamorphosis Tattoo Inc.
SECOND:	The document number of the corporation (if known): PO600015 1013
THIRD:	The file date the articles of incorporation: Much 5,2007
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	ature: Vanessa Wines
	(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.)
•	(Typed or printed name of person signing)
	President (Title of Person Signing)

Filing Fee: \$35