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SECRETARY OF STATE DIVISION OF CORPORATIONS

COVER LETTER

TO: Amendment Section

Division of Corporations	e e
SUBJECT: SATIN TOUCH FAC	LIAL INC
DOCUMENT NUMBER: Pog 000014	419
The enclosed Articles of Dissolution and fee are su	bmitted for filing.
Please return all correspondence concerning this ma	tter to the following:
/ KA J. OHUPP (Name of Contact I)
SATIN TOUCH FA. (Firm/Compa	CIALS INC
4363 Beejeman (Address)	
(1111100)	
SARA SOTA FO (City/State and Zi	- 34135
(City/State and Zi	p Code)
For further information concerning this matter, please	se call:
(Name of Contact Person) at (941) 922-9868
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
Certificate of Status Certificate	5 Filing Fee & S52.50 Filing Fee, ied Copy Certificate of Status & Certified Copy (Additional copy is enclosed)
MAILING ADDRESS:	STREET ADDRESS:
Amendment Section	Amendment Section
Division of Corporations P.O. Box 6327	Division of Corporations Clifton Building
Tallahassee, FL 32314	2661 Executive Center Circle

Tallahassee, FL 32301

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:	
	SATINTOUCH FACIALS, INC	
SECOND:	The document number of the corporation (if known): Pologo 4419	
THIRD:	The date dissolution was authorized: $\frac{12/24/08}{}$	
	Effective date of dissolution if applicable: 12/31/08 (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 entitle	
	The number of votes cast for dissolution was sufficient for approval by	
	tra & Chupp (voting group)	
	(mg g	
	Signature: (By a director, president of 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)	
	Peggy Ann CHUPP (Typed or printed name of person signing)	
	Resident (Title of person signing)	

Filing Fee: \$35