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SECRETARY OF STATE

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: YUDI'S FAS	HION INC.	
DOCUMENT NUMBER: P-070	. 64940000	
The enclosed Articles of Revocation of Dissolu	tion and fee are submitted for filing.	
Please return all correspondence concerning this	s matter to the following:	
YUDIMIS RO		
(Name of	Contact Person)	
YUDI'S FA	SHION INC.	
(Firm	n/Company)	
630 E	:. 57 ST.	
(/	Address)	
HIALEAH	HFL. 33013	
(City/Stat	te and Zip Code)	
For further information concerning this matter, p	please call:	
YUDIMIS RODRIGUEZ	at (305) 825-1247	
(Name of Contact Person)	(Area Code & Daytime Telephone Number)	
Enclosed is a check for the following amount:		
	\$43.75 Filing Fee & \$52.50 Filing Fee, Certified Copy (Additional copy is enclosed) \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)	ed)
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

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:
	YUDI'S FASHION INC.	
SECOND:	The document number of the corporation (if known): 08/17/2007	4. B.
THIRD:	The date dissolution was authorized: 08/17/2007	ES S
	Effective date of dissolution if applicable: 08/17/2007	55 -5
	(no more than 90 days after dissolution	n feliage)
FOURTH:	Adoption of Dissolution (CHECK ONE)	STATI STATI
	Dissolution was approved by the shareholders. The number of votes case was sufficient for approval.	t for desolutio
	Dissolution was approved by the shareholders through voting groups.	
	The following statement must be separately provided for each voting group to vote separately on the plan to dissolve:	entitled
	The number of votes cast for dissolution was sufficient for approval by	
	100 VOTES	
	(voting group)	
	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 fiducially)	
	YUDIMI RODRIGUEZ	
	(Typed or printed name of person signing)	
	PRESIDENT AND AGENT	
	(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 Corpo	oration: YUDI'S FASHION INC.
	ation will be the date the dissolution is filed with the Department of State or as example Articles of Dissolution.
Description of	information that must be included in a claim:
	
Mailing address	s where claims can be sent: (Claims cannot be sent to the Division of Corporations) 630 E. 57 ST. HIALEAH FL. 33013
	000 E. 07 OT. TIIALLATTI E. 00010
	t the above named corporation will be barred unless a proceeding to enforce the claim is commenced after the filing of this notice.
YUDIMI I	RODRIGUEZ Mywy
	Printed Name of the Person Filing Signature of the Person Filing

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