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COVER LETTER

TO: Amendment Section

Tallahassee, FL 32314

Division of Corporations **SUBJECT: DISSOLUTION OF CORPORATION DOCUMENT NUMBER:** <u>P0</u>7000060559 The enclosed Articles of Dissolution and fee are submitted for filing. Please return all correspondence concerning this matter to the following: LEOMIRA VASQUEZ (Name of Contact Person) CAPRICHOS BOUTIQUE INC. (Firm/Company) 263 NW 82 AVE (Address) MIAMI, FL 33126 (City/State and Zip Code) For further information concerning this matter, please call: at (786 LEOMIRA VASQUEZ (Area Code & Daytime Telephone Number) (Name of Contact Person) Enclosed is a check for the following amount: □\$35 Filing Fee ✓\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee; Certificate of Status Certified Copy Certificate of Status & (Additional copy is Certified Copy enclosed) (Additional copy is enclosed) **MAILING ADDRESS:** STREET ADDRESS: Amendment Section Amendment Section **Division of Corporations Division of Corporations** P.O. Box 6327 Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

ARTICLES OF DISSOLUTION

	section 607.1403, Florida Statutes, this Florida profit corporation submits the following articles
of dissolut	2008 MAY 22 PM 4: 5
FIRST:	The name of the corporation as currently filed with the Florida Department of the CAPRICHOS BOUTIQUE INC.
SECOND:	The document number of the corporation (if known): P0700060559
THIRD:	The date dissolution was authorized: APRIL 30, 2008
	Effective date of dissolution <u>if applicable:</u> (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
	(voting group)
	Signature: (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)
	LEOMIRA VASQUEZ
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)

Filing Fee: \$35