

P07000075905

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850)617-6300

From:

Account Name : KRISJOENNA SERVICES, INC.
Account Number : I20080000033
Phone : (305)644-3055
Fax Number : (305)644-3052

2011 MAY 15 PM 2:44
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DISSOLUTION OR WITHDRAWAL MALU COSMETIC SERVICES, INC

| | |
|-----------------------|---------|
| Certificate of Status | 0 |
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Handwritten signature and date: 5-5-11

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May 5, 2011

FLORIDA DEPARTMENT OF STATE
Division of Corporations

MALU COSMETIC SERVICES, INC
5890 W FLAGLER ST
MIAMI, FL 33144US

SUBJECT: MALU COSMETIC SERVICES, INC
REF: P07000075905

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The current name of the entity is as referenced above. Please correct your document accordingly.

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Annette Ramsey
Regulatory Specialist II

FAX Aud. #: H11000124512
Letter Number: 911A00010973

RECEIVED
11 MAY -5 AM 8:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

P.O BOX 6327 - Tallahassee, Florida 32314

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:

MALU COSMETIC SERVICES, INC

SECOND: The document number of the corporation (if known): P07000075905

THIRD: The date dissolution was authorized: 05/04/2011

Effective date of dissolution if applicable: _____

(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)

MARIA CACERES

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

Filing Fee: \$35

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JULIA A. GIBSON, CLERK
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