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SECRETARY OF STATE

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JAN 1.5 2010

COVER LETTER

TO: Amendment Section **Division of Corporations** Dissolution of CORPORATION SUBJECT: _ DOCUMENT NUMBER: P 07 0000 8 7871 The enclosed Articles of Dissolution and fee are submitted for filing. Please return all correspondence concerning this matter to the following: PHUONE THI NEUYEN
(Name of Contact Person) LUCY NAILS INC.
(Firm/Company) 4895 Windward Pascage Dz. #8

(Address) Boynton Beach FL 33436
(City/State and Zip Code) For further information concerning this matter, please call: PHUS NE T- NGUYEN at (954) 536-314d

Name of Contact Person) (Area Code & Daytime Telephone Number) 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 Certificate of Status & Certified Copy

(Additional copy is enclosed)

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

Certified Copy

(Additional copy is enclosed)

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:				
	LUCY NAILS INC				
SECOND	: The document number of the corporation (if known):	000	8 7 <i>8</i>	7/	
THIRD:	The date dissolution was authorized: $\frac{11/28}{2009}$) 			
	Effective date of dissolution if applicable: 11 28 200 9 (no more than 90 days after diss	solution file	e date)		
FOURTH:	Adoption of Dissolution (CHECK ONE)				
	Dissolution was approved by the shareholders. The number of votes was sufficient for approval.	cast for	r disso	lution	
	Dissolution was approved by the shareholders through voting group	s.			
	The following statement must be separately provided for each voting groto vote separately on the plan to dissolve:	oup enti	tled	•	
	The number of votes cast for dissolution was sufficient for approval by	SEGRETAF	2010 JAN 13	of a fraction	
	(voting group)	RYOUSTATE SEELFLORIDA	13 PM 1:21		
	Signature: (By a director, president or other officer - Af directors or officers have not been selected an incorporator - if in the hands of a recover, trustee, or other court appointed fiduciary that fiduciary)				
	PHUONE T. NGUYEN (Typed or printed name of person signing)	_			
	President				
	(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. LUCY NAILS IN'C Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the Articles of Dissolution. Description of information that must be included in a claim: Dissolution of Corporation from 11/28 Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations) A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.