P07000093959

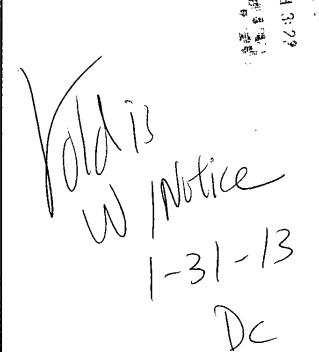
| (Re | equestor's Name) | |
|-------------------------|----------------------|----------------|
| | | |
| (Ac | ldress) | |
| | | |
| (Ac | idress) | |
| • | , | |
| (0) | | |
| (Cr | ty/State/Zip/Phone # | !) |
| D DICK HD | □ MAKAPT | |
| PICK-UP | U WAN | MAIL |
| | | |
| (Bu | ısiness Entity Name | <u> </u> |
| | , | |
| (Dc | ocument Number) | |
| (50 | oodinone (talliber) | |
| | | |
| Certified Copies | _ Certificates o | f Status |
| | | |
| Special Instructions to | Filing Officer: | |
| | | |
| | | |
| | | |
| | | 1 |
| | | |
| | | |
| | | l |
| | | |

Office Use Only



800244072828

800244072828 01/28/13--01020--004 **43.75



COVER LETTER

| TO: Amendment Section Division of Corporations | |
|---|--|
| SUBJECT: Ashtyn's Attic, | Inc. |
| | 0093959 |
| The enclosed Articles of Dissolution and f | fee are submitted for filing. |
| Please return all correspondence concernin | g this matter to the following: |
| Georganna S. Chatha | Contact Person) |
| | |
| | n/Company) |
| 1818 NE 20 St. | · · · · · · · · · · · · · · · · · · · |
| Fort Lauderdale, FL 3 | ddress) 33305 |
| (City/Sta | te and Zip Code) |
| For further information concerning this ma | tter, please call: |
| Georganna Chatham | at (954) 801-1997 |
| (Name of Contact Person) | (Area Code & Daytime Telephone Number |
| Enclosed is a check for the following amou | int: |
| □ \$35 Filing Fee □ \$43.75 Filing Fee & Certificate of Status | \$43.75 Filing Fee & \$\sum \\$52.50 Filing Fee, Certified Copy (Additional copy is enclosed) \$\sum \\$\$ \$43.75 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed) |
| MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327 | STREET ADDRESS: Amendment Section Division of Corporations Clifton Building |

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 Stat | e: | | | | |
|---------|---|--|----------|-------------------------------|--|--|--|
| | Ashtynis Athe Inc. | | | | | | |
| SECOND: | The document number of the corporation (if known): Po 70000 | <u> 29c</u> | 395 | 9 | | | |
| THIRD: | The date dissolution was authorized: 12-23-2013 | | | | | | |
| | Effective date of dissolution if applicable: (no more than 90 days after dissolution) | n tile da | te) | | | | |
| FOURTH: | Adoption of Dissolution (CHECK ONE) | | | | | | |
| | Dissolution was approved by the shareholders. The number of votes eas was sufficient for approval. | t for di | issolut | lion | | | |
| | ☐ 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: | entitle | d | | | | |
| | The number of votes cast for dissolution was sufficient for approval by | The state of the s | 13 JAN 2 | ئو مة الله سهر " الا | | | |
| | (voting group) | 地位 | 8 | | | | |
| | Signature: (By a director president or other officer - if directors or officers have not been selected, by | 地區 | PM 3: 25 | u c | | | |
| | an incorporator if in the hands of a receiver, trustee, or other court appointed fiduciary, by | | | | | | |
| | Georganna S. Chatham | | | | | | |
| | (Typed or printed name of person signing) | | | | | | |
| | President / Owner | | | | | | |
| | (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 Corporation: Ashtyn's Attic Inc. | |
|--|---|
| Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the <i>Articles of Dissolution</i> . | |
| Description of information that must be included in a claim: | |
| | |
| | _ |
| | _ |
| | _ |
| | |
| | |
| Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations) | |
| Georganna S Chatham | |
| 1818 N.E. 20 St. | |
| Fort Lauderdale, FL 33305 | |
| | |
| | |

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.

Georgana Chathan
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