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| PICK-UP WAIT MAIL |
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| (Business Entity Name) |
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| (Document Number) |
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COVER LETTER

TO: Amendment Section

| Division of Corporations | | |
|---|---|--|
| SUBJECT: Maryse Elle, Inc. | | |
| DOCUMENT NUMBER: P08000026 | 708 | |
| The enclosed Articles of Dissolution and fe | e are submitted fo | or filing. |
| Please return all correspondence concerning | this matter to the | following: |
| Maryse Labbe | | |
| (Name of C | Contact Person) | |
| Maryse Elle, Inc. | | |
| (Firm | /Company) | |
| 12917 SW 23 Street | | |
| (Ad | dress) | |
| Miramar, FL. 33027 | | |
| (City/State | e and Zip Code) | |
| For further information concerning this matt | er, please call: | |
| Maryse Labbe | at (954 | 441-2801 |
| (Name of Contact Person) | (Area C | Code & Daytime Telephone Number) |
| Enclosed is a check for the following amoun | nt: | |
| √\$35 Filing Fee ☐\$43.75 Filing Fee & [Certificate of Status | \$43.75 Filing F Certified Copy (Additional copy enclosed) | Certificate of Status & |
| 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: | | |
|---------|--|--|--|
| | Maryse Elle, Inc. | | |
| SECOND: | The document number of the corporation (if known): P08000026708 | | |
| THIRD: | The date dissolution was authorized: 4/29/08 | | |
| | Effective date of dissolution <u>if applicable:</u> 4/29/08 (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 | | |
| | OR SE TALL | | |
| | (voting group) AHASSEE | | |
| | 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) | | |
| | Maryse Labbe | | |
| | (Typed or printed name of person signing) | | |
| | President | | |
| | (Title of person signing) | | |

Filing Fee: \$35