

208000065057

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H11000150161 3)))



H110001501613ABCQ

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations  
Fax Number : (850) 617-6380

From: Account Name : LAZARUS CORPORATE FILING SERVICE  
Account Number : I20000000019  
Phone : (305) 552-5973  
Fax Number : (305) 220-1440

FILED  
11 JUN -7 AM 9:55  
TALLAHASSEE, FLORIDA

DISSOLUTION OR WITHDRAWAL  
A PAINTERS TOUCH INC.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

Help

*voidiss  
upcom*

H11000150161

## 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:

A PAINTER'S TOUCH INC.

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

P08000065057

THIRD: The date dissolution was authorized: 6/7/11

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)

Yamilia Suarez

(Typed or printed name of person signing)

D/P

(Title of person signing)

FILED  
11 JUN -7 AM 9:55  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

H11000150161