

P09000094253

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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STATE
TALLAHASSEE, FLORIDA

FL Diss
7/22/11

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: PALMERA'S BODY SHOP CORPORATION

DOCUMENT NUMBER: P09000094253

The enclosed *Articles of ^{dissolution} Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

NEFAIDA PALMERA

Name of Contact Person

PALMERA'S BODY SHOP CORPORATION

Firm/ Company

9522 NW 2 AVE

Address

MIAMI FL 33150

City/ State and Zip Code

NEFAIDA 97@HOTMAIL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

NEFAIDA PALMERA

Name of Contact Person

at (305)

322 6765

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

☒ \$35 Filing Fee

☐ \$43.75 Filing Fee &
Certificate of Status

☐ \$43.75 Filing Fee &
Certified Copy
(Additional copy is enclosed)

☐ \$52.50 Filing Fee
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

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:

PALMERA'S BODY SHOP CORPORATION

SECOND: The document number of the corporation (if known): P09000094253

THIRD: The date dissolution was authorized: 07-11-2011

Effective date of dissolution if applicable: 07-11-2011

(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: (X) [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)

NEFAIDA PALMERA

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

Filing Fee: \$35

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