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.

(((H160000930063)))



H460000930063ABC7

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 : WILLAIMS & MORRIS, P.A.

Account Number : 120030000069 Phone : (786)256-6615

Fax Number : (888)836-5107

DISSOLUTION OR WITHDRAWAL SHAPEWEAR LINE, CORP.

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

UAL-

8: 52

((H160000930063))) 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:		
	SHAPEWEAR LINE, CORP.		
SECOND:	The document number of the corporation (if known): PII 0000 18723		
THIRD:	The date dissolution was authorized: 12-31-2014		
	Effective date of dissolution if applicable:		
	(no more than 90 days after dissolution file date) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.		
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		
	조선 하 기 문		
	(voting group)		
S	Signature: Varia chara Cutieren 55		
	(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)		
	MARIA C. GUTIERREZ		
•	(Typed or printed name-of person signing)		
	PRESIDENT		
	(Title of person signing)		

((H160000930063))

((H160000930063))

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:	SHAPEWEAR LINE, CORP.
Date of dissolution will be specified in the Articles of	the date the dissolution is filed with the Department of State or as Dissolution.
Description of information	that must be included in a claim:
W. (A. 14 - 14 - 14 - 14 - 14 - 14 - 14 - 14	
Mailing address where cla	ims can be sent: (Claims cannot be sent to the Division of Corporations)
	ims can be sent: (Claims cannot be sent to the Division of Corporations) 11250 NW 25 STREET STE 114-118
	STE 114-118
	MIAMI, FL 33172
A claim against the above within 4 years after the fili	named corporation will be barred unless a proceeding to enforce the claim is commenced ng of this notice.
· MARIA	C. GUTIERREZ X faria for lettery ame of the Person Filing Signature of the Person Filing
Printed No	ame of the Person Filing Signature of the Person Filing