P12000092880

	(Requestor's Name)	
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	(City/State/Zip/Phone #)	
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COVER LETTER

TO: Amendment Section

Division of Corporations SUBJECT: Dissolution of Corporation The enclosed Articles of Dissolution and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Solfrid Tellefesen (Name of Contact Person) Million Dollar Hair, Inc. (Firm/Company) 850 6th Ave N # 306 (Address) Naples, Fl. 34102 (City/State and Zip Code) For further information concerning this matter, please call: Lene Fernstrom (Name of Contact Person) (Area Code & Daytime Telephone Number) Enclosed is a check for the following amount: \$35 Filing Fee \$\Bigcup \$43.75 Filing Fee & \Bigcup \$43.75 Filing Fee & \Bigcup \$52.50 Filing Fee, Certificate of Status Certificate of Status & Certified Copy (Additional copy is Certified Copy (Additional copy is enclosed) enclosed) **MAILING ADDRESS:** STREET ADDRESS: **Amendment Section** Amendment Section **Division of Corporations** Division of Corporations P.O. Box 6327 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32314

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: Million Dollar Hair, Inc.
SECOND:	The document number of the corporation (if known): P12000092880
THIRD:	The date dissolution was authorized: 12/31/13
	Effective date of dissolution if applicable: 12/31/13 (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
	Signature: (By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if higher hands of a receiver, trustee, or other count appointed fiduciary, by that fiduciary) Solfrid Tellefsen (Typed or printed name of person signing)
	President
	(Title of person signing)

Filing Fee: \$35