## P13000034167

(Re	questor's Name)	
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(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
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## **COVER LETTER**

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TO: Amendment Section Division of Corporations	••••••••••••••••••••••••••••••••••••••
SUBJECT: EMPOWER FAShio	n Dissolution
DOCUMENT NUMBER: P130003	4167
The enclosed Articles of Dissolution and fee are submit	itted for filing.
Please return all correspondence concerning this matter	to the following:
BOBBIE CENT	
The celler Org (Firm/Company)	janization
3600 FAU BIVD (Address)	Suite 10!
BOCA ROTON, FL (City/State and Zip Co	33431 F6 F
For further information concerning this matter, please ca	all:
Bobbie Celler at (5) (Name of Contact Person) (A)	Arca Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
\$35 Filing Fee \$\Bigcup \$43.75 Filing Fee & Certificate of Status Certified (Additional enclosed)	al copy is Certified Copy
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:
	Empower Fashion, Inc.
SECOND:	The document number of the corporation (if known): P13000034167
THIRD:	The date dissolution was authorized: 5/29/2014
	Effective date of dissolution <u>if applicable</u> : 512912014 (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)
	Robbie Celler
	(Typed or printed name of person signing)
	(Title of anyon signing)
	(Title of person signing)

Filing Fee: \$35