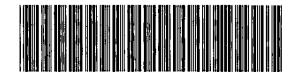
PISMOWAR.

(Red	questor's Name)		
(Add	dress)		
(Add	dress)		
(City	y/State/Zip/Phone	e #)	
PICK-UP	☐ WAIT	MAIL	
(Bus	siness Entity Nan	ne)	
(Document Number)			
Certified Copies	Certificates	of Status	
Special Instructions to Filing Officer:			

Office Use Only



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JAN 12 2016

K. VYMITE



COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Keke Spa Inc	the second secon
DOCUMENT NUMBER: P1500006022	2
The enclosed Articles of Dissolution an	d fee are submitted for filing.
Please return all correspondence concern	ning this matter to the following:
Yongmei Cai	
(Name	of Contact Person)
Youngmei Corp	•
(F	irm/Company)
6724 Columbia Ave	
	(Address)
Lake Worth FL 33467	
(City/S	State and Zip Code)
For further information concerning this i	matter, please call:
Irene Cai	at () 283-1258
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following am	nount:
■ \$35 Filing Fee □ \$43.75 Filing Fee Certificate of Status	
MAILING ADDRESS:	STREET ADDRESS:

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF DISSOLUTION

Pursuant to section 607.1401, 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 Keke Spa Inc	of State:		
SECOND:	The document number of the corporation (if known):			
THIRD:	The file date of the articles of incorporation:			
FOURTH:	(CHECK AT LEAST ONE BOX)			
	None of the corporation's shares have been issued.			
	☐ The corporation has not commenced business.			
FIFTH:	No debt of the corporation remains unpaid.			
SIXTH:	The net assets of the corporation remaining after winding up have been distrito the shareholders, if shares were issued.	ibuted		
SEVENTH	Adoption of Dissolution (CHECK ONE)	16 TA		
	A majority of the incorporators authorized the dissolution.	LLAH ECKET		
	☐ A majority of the directors authorized the dissolution.	6 JAN D8 AH 4: 43 SECRETARY OF STATE ALLAHASSEE FLORIDA		
Sign	(By a director, president or other officer - if directors or officers have not been selected, by an ir in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.)	D'		
	Lanpu Wang			
	(Typed or printed name of person signing)	•		
	President			
	(Title of Person Signing)			

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:			
Date of dissolution will be the date the dissolution is fil specified in the Articles of Dissolution.		ent of State or as	
Description of information that must be included in a c	laim:	•	
			_
		·	
Mailing address where claims can be sent: (Claims can	not be sent to the Div	vision of Corporations)	
1. Internal Revenue Service, Cincinnati, OH, 45999-0023			
2. Florida Department of Revenue 5050 W Tennessee St, 7	'allahassee, FL, 32399-	0100	_
A claim against the above named corporation will be b within 4 years after the filing of this notice.	arred unless a procce	ding to enforce the claim is commend	ced
Lanpu Wang	(1)	Way Lan Me Signature of the Person Filing	
Printed Name of the Person Filing		Signature of the Person Filing	

Fee: No charge if included with Articles of Dissolution. If filed separately \$35.00