P18000013539

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAI	<u>L</u>
(Business Entity Name)	
(Document Number)	
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Special Instructions to Filing Officer:	

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COVER LETTER

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	mendment Section ivision of Corporations	,		THE OCT 15 PAGE 36
SUBJEC	DISSOLUTION T:			5 PA FE
DOCUM	P18000013539)		
The enclo	osed Articles of Dissolution and i	fee are submitted fo	r filin	g.
Please re	turn all correspondence concernin	g this matter to the	follov	ving:
LUIS R. C	ALDERON			
	(Name of	Contact Person)		
BELAIR A	CCOUNTING SERVICES, INC			
	(Fir	m/Company)		
1627 E. V	INE STREET, SUITE 110			
	(A	(ddress)	_	
KISSIMM	EE, FL 34744			
	(City/Sta	ate and Zip Code)		
For further	er information concerning this ma	tter, please call:		
LUIS R. C	ALDERON	407) 9449 at (262	
	(Name of Contact Person)	(Area C	ode)	(Daytime Telephone Number)
.5. 4.	is a check for the following amount of the second s		ee &	□ \$52.50 Filing Fee,
₹ ₹	Certificate of Status	Certified Copy (Additional copy	/ is	Certificate of Status & Certified Copy
SEP 21 AM	IASSA SSF	enclosed)		(Additional copy is enclosed)
ເລ <u>M</u>	AILING ADDRESS:		_	EET ADDRESS:
A	mendment Section Division of Corporations			ndment Section sion of Corporations
	O. Box 6327			on Building
Т	allahassee, FL 32314			Executive Center Circle thassee, 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: BE YOU BOUTIQUE BY JANNETTE SANTAEUGENIA, INC						
SECOND:	The document number of the corporation (if known):						
THIRD:	The date dissolution was authorized:						
	Effective date of dissolution if applicable: 05/31/2018						
	(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						
	Signature: (By a director, bresident 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) JEANNETTE SANTAEUGENIA (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: BE YOU BOUTIQUE BY JANNETTE SANTAEUGENIA, INC
Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the <i>Articles of Dissolution</i> .
Description of information that must be included in a claim:
THE CORPORATION DID NOT HAVE ANY ACTIVITIES
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)
8865 COMMODITY CIRCLE, STE 5-201, ORLANDO, FL 32819
A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.
JEANNETTE SANTAEUGENIO
Printed Name of the Person Filing Signature of the Person Filing