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COVER LETTER

TO: Amendment Section Division of Corporations PURE BLISS SOAPS INC SUBJECT: **DOCUMENT NUMBER:** The enclosed Articles of Dissolution and fee are submitted for filing. Please return all correspondence concerning this matter to the following: **CHARLES GENTRY** (Name of Contact Person) ACCOUNTING AND TAX ASSOCIATES (Firm/Company) 1903 N HERCULES AVE (Address) CLEARWATER, FL 33763 (City/State and Zip Code) For further information concerning this matter, please call: CHARLES GENTRY 727-230-6964 (Name of Contact Person) (Area Code) (Daytime Telephone Number) Enclosed is a check for the following amount: □ \$35 Filing Fee □ \$43.75 Filing Fee & ■ \$43.75 Filing Fee & □ \$52.50 Filing Fee, Certificate of Status Certified Copy Certificate of Status & (Additional copy is Certified Copy enclosed) (Additional copy is enclosed) Mailing Address: **Street Address:** Amendment Section Amendment Section

Division of Corporations

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Articles of Bissolution

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: PURE BLISS SOAPS INC The document number of the corporation (if known): P18000082300		
SECOND:			
THIRD:	The date dissolution was authorized: NOVEMBER 20, 2019		
	NOVEMBER 20, 2019 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		
FOURTH:	not be listed as the document's effective date on the Department of State's records. 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:		
	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)	25 FH 6: 50	
	ANELIYA T DA SILVEIRA		
	(Typed or printed name of person signing)		
	PRESIDENT		
	(Title of person signing)	_	

Filing Fee: \$35