P95000084331

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COVER LETTER

Division of Corporations	
SUBJECT: European Body Wrap Inte	mational, Inc.
DOCUMENT NUMBER: P9500008433	1
The enclosed Articles of Dissolution and fee are	submitted for filing.
Please return all correspondence concerning this	matter to the following:
Michael E. Steuer, CPA	
(Name of Contr	act Person)
Michael E. Steuer, CPA, P.A.	
(Firm/Con	npany)
600 Bypass Drive Suite 100 (Addres	2
Clearwater, FL 33764	»)
(City/State and	I Zip Code)
For further information concerning this matter, p	lease call:
Michael E. Steuer, CPA	at (_727) 797-9000
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
(Ac er	rtified Copy Iditional copy is Iditional copy is
MAILING ADDRESS: Amendment Section	STREET ADDRESS: Amendment Section
Division of Corporations	Division of Corporations
P.O. Box 6327	Clifton Building
Tallahassee, FL 32314	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:			
	European Body Wrap International, Inc.	<u>.</u>	•	
SECOND:	The document number of the corporation (if known): P95000084331			
THIRD:	The date dissolution was authorized: 03/08/11	·		
	Effective date of dissolution if applicable: 03/08/11 (no more than 90 days after dissolution and the dissolution of the disso	ion file date))	
FOURTH:	Adoption of Dissolution (CHECK ONE)			
	✓ Dissolution was approved by the shareholders. The number of votes ca was sufficient for approval.	st for dis	solution	n
	Dissolution was approved by the shareholders through voting groups.			
•	The following statement must be separately provided for each voting group to vote separately on the plan to dissolve:	o entitled	·	
	The number of votes cast for dissolution was sufficient for approval by			
		TAL	13 13 13 13 13 13 13 13 13 13 13 13 13 1	
	(voting/group)	CRETARY O	2011 APR 11 P	TIL
;	Signature: All Drug	F STATI	6h 14 H3	C
	(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)		ون	
	Dennis Verdier	•		
	(Typed or printed name of person signing)		:	
	President			
	(Title of person signing)			

Filing Fee: \$35