

TRANSMITTAL LETTER

Pg 7000000517

Department of State  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

SUBJECT: \_\_\_\_\_

(Proposed corporate name - must include suffix)

*duss*

000003097320--0  
-01/13/00--01016--020  
\*\*\*\*\*35.00 \*\*\*\*\*35.00

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

☐ \$70.00  
Filing Fee

☐ \$78.75  
Filing Fee  
& Certificate of Status

☐ \$78.75  
Filing Fee  
& Certified Copy

☐ \$87.50  
Filing Fee,  
Certified Copy  
& Certificate of  
Status

ADDITIONAL COPY REQUIRED

FROM: *Jaci Vallio*

Name (Printed or typed)

*1212 Red Dandy Dr.*

Address

*Orlando, FL 32818*

City, State & Zip

Daytime Telephone number

FILED  
00 JAN 12 PM 2:31  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*AJR  
1/13/00*

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF DISSOLUTION

FILED  
00 JAN 12 PM 2:31  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Pursuant to section 607.1403, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

FIRST: The name of the corporation is: Upper Cuts of Orlando, Inc.

SECOND: The date dissolution was authorized: 9-27-99

THIRD: 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 vote of 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)

Signed this 03 day of January, ~~19~~ 2000.

Signature

Jaci Vallillo  
(By the Chairman or Vice Chairman of the Board, President, or other officer)

Jaci Vallillo

(Typed or printed name)

Vice president  
(Title)