

DATE: 03/21/2013

DOCUMENT ID 201308000170

DESCRIPTION DOMESTIC/DISSOLUTION (DIS)

COPY .00

Receipt

This is not a bill. Please do not remit payment.

HUN PIAZZA 32253 PINEHURST DR. AVON LAKE, OH 44012

STATE OF OHIO CERTIFICATE

Ohio Secretary of State, Jon Husted

1736981

It is hereby certified that the Secretary of State of Ohio has custody of the business records for

DOWNTOWN HAIR PLUS & BOUTIQUE, INC.

and, that said business records show the filing and recording of:

Document(s)

Document No(s):

DOMESTIC/DISSOLUTION

201308000170

Effective Date: 05/20/2013

United States of America State of Ohio Office of the Secretary of State Witness my hand and the seal of the Secretary of State at Columbus, Ohio this 21st day of March, A.D. 2013.

Ohio Secretary of State



Form 561 Prescribed-by: JON HUSTED Ohio Secretary of State

Central Ohio: (614) 466-3910
Toll Free: (877) SOS-FILE (767-3453)
www.OhioSecretaryofState.gov
Busserv@OhioSecretaryofState.gov

Makes checks payable to Ohio Secretary of State

Mail this form to one of the following:

Regular Filing (non expedite) P.O. Box 1329 Columbus, OH 43216

Expedite Filing (Two-business day processing time requires an additional \$100.00).
P.O. Box 1390
Columbus, OH 43216

Certificate of Dissolution (For-Profit, Domestic Corporation) Filing Fee: \$50 Complete the following information. The corporation named below has adopted a resolution of dissolution. Name of Corporation Downtown Hair Plus & Boutique, Inc. 1736981 Charter Number Location of Principal Office in Ohio Cuyahoga Cleveland State City County The internet address of each domain name held or maintained by or on behalf of the corporation: The corporation did not hold or maintain any domain names.

Form 561

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Hun A. Piazza	
Name	
32253 Pinehurst	Drive
Address	
Avon Lake	Ohio 44012
City	State Zip Code
1.4.40.5	
ase complete this	section if the corporation is appointing a new agent.
	ACCEPTANCE OF APPOINTMENT
e Undersigned,	,named herein as the
	Statutory Agent Name
tutory agent for,	
	Corporation Name
ehy acknowledges	and accepts the appointment of statutory agent for said corporation.
•	and accepts the appointment of statutory agent for said corporation.
eby acknowledges tutory Agent Signa	iture
•	
tutory Agent Signa	iture
tutory Agent Signa	Individual Agent's Signature/Signature on behalf of Corporate Agent
tutory Agent Signal If the agent is a edate of dissolution te: The date of dissolution	Individual Agent's Signature/Signature on behalf of Corporate Agent an individual using a P.O. Box, check this box to confirm the agent is an Ohio resident. on if other than the filing date

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Check	only one box below and provide inform	nation as required:
	1701.86(C), if an initial stated capital was business, or if an initial stated capital is s	
Nam	e	Address
Nam	е	Address
Nam		Address
110011		radioos
∩ (2.) The re	(D), directors may adopt a resolution of oproper statement of the basis for the adoption of dissolution was adopted:	
	When the corporation has been adjudge the creditors;	ged bankrupt or has made a general assignment for the benefit of
	By leave of the court, when a receiver which the affairs of the corporation are	has been appointed in a general creditor's suit or in any suit in et o be wound up;
		ave been sold at judicial sale or otherwise;
		for failure to file annual franchise or excise tax returns or for failure ne corporation has not been reinstated or does not desire to be
	○When the period of existence of the co	orporation specified in its articles has expired.

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y signify and submitting this form to the equisite authority to execute this docume	Ohio Secretary of State, the undersigned hereby certifies that he or she has thent.
tequired When the resolution is adopted y the incorporators, the ertificate shall be signed by	x July Land
ot less than a majority of ne incorporators.	
n all other cases, the certificate hall be signed by any authorized officer,	By (if applicable)
nless the officer fails to execute nd file such a certificate within 30 days	Hun A. Piazza
ifter the date upon which such sertificate is to be filed. In the latter event, the certificate may be signed by any three (3) shareholders or,	Print Name
there are less than three (3)	
chareholders, all of the shareholders, form a statement that the persons signing the certificate are	Signature
shareholders and are filing the certificate because of the failure of the officers to do so.	By (if applicable)
f authorized representative s an individual, then they nust sign in the "signature" pox and print their name n the "Print Name" box.	Print Name
f authorized representative	
s a business entity, not an ndividual, then please print he business name in the	Signature
signature" box, an	
authorized representative of the business entity	By (if applicable)
nust sign in the "By" box	
and print their name in the	
'Print Name" box.	Print Name
	BAMSEL Walson ON Explose 19012017 Commission of prints 7/30/2017
	7/30/2017

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Notice of Dissolution to Creditors and Claimants against Corporation (pursuant to ORC 1701.87)

Notice of Dissolution of	Downtown Hair Plus & Boutique, Inc.
l l	Name of Comparation

All claims shall be presented in writing and shall the claimant and contain sufficient information to reasonably inform the corporation of the substance of the claim.

The mailing address to which the person must send the claims is:

Hun A. Piazza	
32253 Pinehurst Drive	
32253 Pinehurst Drive Avon Lake, OH 44012	
Address	

The deadline by which the corporation must receive the claim

(May not be less than 60 days after

(May not be less than 60 days after the date the notice is given.)

The claim will be barred if the corporation does not receive the claim by the deadline.

The corporation may make distributions to other creditors or claimants, including distributions to shareholders of the corporation, without further notice to the claimant.

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Last Revised: 11/29/12

Complete the information in this section.

AFFIDAVIT

In lieu of dissolution releases from various governmental authorities (ORC section 1701.86(I)).

Downtown Hair Plus & Boutique, Inc.

Name of Corporation

The undersigned, being first duly sworn, declares that on the dates indicated below, each of the named state governmental agencies was advised IN WRITING of the scheduled date of filing of the Certificate of Dissolution and was advised IN WRITING of the acknowledgement by the corporation of the applicability of the provisions of section 1701.95 of the ORC.

Agency	Date Notified	Agency	Date Notified
Ohio Bureau of Workers' Compensation 30 W. Spring Street Columbus, Ohio 43215	10/02/2012	Ohio Job & Family Services Status and Liability Section Data Correspondence Control Fax: 614-752-4811 Phone: 614-466-2319	10/02/2012
		Overnight: P.O. Box 182413 Columbus, OH 43218-2413	Regular: P.O. Box 182413 Columbus, OH 43218-2413
	Agency	Date Notified	
	Ohio Department of Ta Dissolution Section 4485 Northland Ridge Columbus, Ohio 43229	10/02/2012 Blvd.	

Note: This affidavit must be signed by one or more persons executing the certificate of dissolution or by an officer of the corporation. President Signature Hun A. Piazza Name 32253 Pinehurst drive Mailing Address 440412 Ohio Avon Lake Zip Code State Acknowledged before me and subscribed in my presence on 10-6-2012 Date NOTARY PUBLIC AND STATE OF OF NOTARY Public Commission 110G-**Expires** Recorded in Lorain County My Comm. Exp. 4/2/14

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Complete the information in this section.

AFFIDAVIT OF PERSONAL PROPERTY (ORC Section 1701.86(H)(1)) State of Ohio County of Cuyahoga SS: Hun A. Piazza Name of Officer , being first duly sworn, deposes and says that she/he is President Downtown Hair plus & Boutique, Inc. of Title of Officer Name of Corporation 1701.86 and this affidavit is made in compliance with section of the Ohio Revised Code. That said corporation has: (Check one (1) of the following) ⊠A. Has no personal property in any county in the State of Ohio B. Has personal property in the following county(ies) and that the net assets of said corporation are sufficient to pay all personal property taxes accrued to date. Title: President Acknowledged before me and subscribed in my presence on Seal NOTARY PUBLIC, STATE OF ONIO My Commission Expires 7/30/2017 Expiration date of Notary Public's Commission

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ODJFS Status and Liability Section P. O. Box 182413 Columbus, OH 43218-2413

October 02, 2012

Re: Dissolution of corporation

Downtown Hair Plus & Boutique, Inc..

Please be advised that I, Hun A. Piazza am the president and 100% Shareholder of Downtown Hair Plus & Boutique, Inc., and I intend to file a Certificate of Dissolution on December 15, 2012 and hereby acknowledge the applicability of the provisions of section 1701.87(B) of the Ohio Revised Code. The claim will be barred if Downtown Hair Plus & Boutique, Inc. does not receive the claim by December 15, 2012. I acknowledge that my company may make distribution to other creditors or claimants including distributions to the shareholder of the corporation without further notice. This is the final notification.

Thank you.

Sincerely,

Hun A. Piazza President

32253 Pinehurst Drive Avon Lake, OH 44012

Charter#: 1736981

Ohio Dept. of Taxation Dissolution Section 4485 Northland Ridge Blvd. Columbus, OH 43229

October 02, 2012

Re: Dissolution of corporation
Downtown Hair Plus & Boutique, Inc..

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Thank you.

Sincerely,

Hun A. Piazza President

32253 Pinehurst Drive Avon Lake, OH 44012

Charter#: 1736981

Bureau of Workers Compensation 30 W. Spring St. Columbus, OH 43215

October 02, 2012

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Hun A. Piazza President

32253 Pinehurst Drive Avon Lake, OH 44012

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