FORSYTH CO,NC 15 FEE:$ 15.00
PRESENTED & RECORDED: 10/18/2002 09:35AM
DICKIE C. WOOD REGISTER OF DEEDS BY:NELSON
BK2289 P1747 - P1748

BP Nelson

Do not write above this line

Mail after recording to:

CERTIFICATE OF DISSOLUTION
PARTNERSHIP OR BUSINESS UNDER ASSUMED NAME
FORSYTH COUNTY, NORTH CAROLINA

Each of the undersigned hereby certifies that the business formerly conducted in Forsyth County, NC is hereby dissolved as of the 18 day of Oct, 2002, and is filing this information with the Register of Deeds of Forsyth County, pursuant to the provisions of G.S. 66-68:

THE BUSINESS

Name: XANADU SPA

Street & No. 163 STRATFORD Ct Suite 170

City-State-Zip WINSTON SALEM, NC

THE OWNERS

First Name	Middle Name	Last Name	Residence Address
ELIZABETH	ANN	JULIAN	909 Long DR Winston Salem NC 27106

Signed:

Elizabeth A Julian

If Owner is A Corporation

Name of Corporation

Home Office Address

By: _____

_____President

Seal/Stamp

STATE OF NORTH CAROLINA - Forsyth County

I, _____, a Notary Public of Forsyth County, NC do hereby certify that _____ personally came before me this day andacknowledged that ___he is _____ President of _____ _____ and acknowledged on behalf of the corporation, the due execution of the foregoing instrument.

Witness my hand and notarial seal this the ____ day of _____, 20____.

My commission expires _____, 20____. _____Notary Public

Seal/Stamp

STATE OF NORTH CAROLINA - Forsyth County

I, _____, a Notary Public of Forsyth County, NC do hereby certify that _____ _____ personally appeared before me this day and acknowledged the execution of the foregoing instrument.

Witness my hand and notarial seal this the ___ day of _____, 20___

My commission expires _____, 20____. _____Notary Public

Seal/Stamp

STATE OF NORTH CAROLINA - Forsyth County

I, _____, a Notary Public of Forsyth County, NC do hereby certify that _____ _____ personally appeared before me this day and acknowledged the execution of the foregoing instrument.

Witness my hand and notarial seal this the ___ day of _____, 20___

My commission expires _____, 20____. _____Notary Public

STATE OF NORTH CAROLINA - Forsyth County

I, Dickie C. Wood, Register of Deeds of Forsyth County, NC, do hereby certify that Elizabeth A. Julian _____

personally appeared before me this day and acknowledged the execution of the foregoing instrument.

Witness my hand this the 15 day of October, 20 04.

Dickie C. Wood, Register of Deeds for Forsyth County: _____

The foregoing Certificate(s) of _____

_____ is/are certified to be correct at the date of recordation shown on the first page thereof.

Dickie C. Wood, Register of Deeds for Forsyth County by: _____Deputy/Asst.