2004041433 00109
FORSYTH CO, NC FEE $15.00
PRESENTED & RECORDED:
06-11-2004 11:27 AM
DICKIE C WOOD
REGISTER OF DEEDS
By: ROSALYN E MARSH DEPUTY
BK:RE 2479
PG:678-679

Do not write above this line

Mail after recording to:
XANADU SPA
2070 CLOVERDALE AVE STE A
WINSTON-SALEM, NC 27103

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 11 day of JUNE, 2004 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. 2070 CLOVERDALE AVE STE A

City-State-Zip WINSTON-SALEM, NC 27103

THE OWNERS

First Name	Middle Name	Last Name	Residence Address
MISTA	GAY	JULIAN	909 LONG DR W-S, NC 27106
ELIZABETH	ANN	JULIAN	325 LOGAN CT KING, NC 27021

Signed:

Mista Julian _____ _____

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

Witness my hand this the 11 day of June, 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.