

1 P98000101431

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

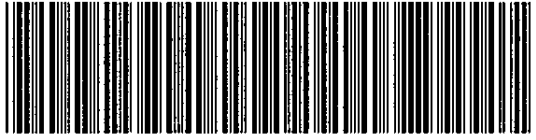
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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*disc with notice*

06/05/09--01037--023 \*\*35.00

FILED  
2009 JUN -5 AM 10:36  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*DR  
6/9/09*

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Request for dissolution of Corporation

**DOCUMENT NUMBER:** P 98 000 101431

The enclosed **Articles of Dissolution** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Ida Everest

(Name of Contact Person)

Spa Agua Santa, Inc

(Firm/Company)

419- 421 NE 2nd Ave

(Address)

Hollandale Bch Florida 33009

(City/State and Zip Code)

For further information concerning this matter, please call:

IDA EVEREST

(Name of Contact Person)

at ( 561 ) 305 6823

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- \$35 Filing Fee     \$43.75 Filing Fee & Certificate of Status     \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)     \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)

**MAILING ADDRESS:**

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**STREET ADDRESS:**

Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

June 2, 2009

Name  
Contact IDA EVEREST

Telephone #: 561 305 6823

Address : 452 HIGH ST

Boca Raton FL. 33432

Please find attached form for  
dissolution of Corporation  
and check for \$35.

Thank you.  
TCC  
TCC

ARTICLES OF DISSOLUTION

FILED

2009 JUN -5 AM 10:36  
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 as currently filed with the Florida Department of State: SPA AQUA SANTA INC

SECOND: The document number of the corporation (if known): 898000101431

THIRD: The date dissolution was authorized: 5.22.09  
Effective date of dissolution if applicable: 5.22.09  
(no more than 90 days after dissolution file date)

FOURTH: 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 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)

Signature: [Signature] 5-22-09  
(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)

IDA EVEREST  
(Typed or printed name of person signing)

PRESIDENT  
(Title of person signing)

## Notice of Corporate Dissolution

This notice is submitted by the dissolved corporation named below for resolution of payment of unknown claims against this corporation as provided in s. 607.1407, F.S.

This "*Notice of Corporate Dissolution*" is optional and is not required when filing a voluntary dissolution.

Name of Corporation: SPA AQUASANTA, INC.

Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the *Articles of Dissolution*.

Description of information that must be included in a claim:

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Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

452 High Street  
Boca Raton Florida, 33432.  

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A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

IDA EVEREST  
Printed Name of the Person Filing

[Signature]  
Signature of the Person Filing