G-1	T 320
MARY RUTH BAKER 4451A S PINE AVE OCALA FL 34480	
City/State/Zip Phone #	
•	Office Use Only
1.	ENT NUMBER(S), (if known): (Document #)
2	-09/04/0101123027 ******35_00_*******35_0
2(Corporation Name)	(Document #)
3	
(Corporation Name)	(Document #)
4 (Corporation Name)	(Document #)
Walk in Pick up time	
Mail out Will wait	Photocopy Certificate of Status ??
NEW FILINGS	AMENDMENTS
 Profit Not for Profit Limited Liability Domestication Other 	AMENDMENTS Amendment Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger
OTHER FILINGS	REGISTRATION/QUALIFICATION
Annual Report Fictitious Name Correcte B:'e date CR2E031(7/197) ARt.	 Foreign Limited Partnership Reinstatement Trademark Other
A LE	
forfact bi orig	Examiner's Initials

ARTICLES OF DISSOLUTION

Pursuant to 607.1401, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

FIRST: The name of the corporation is: HOLISTIC HEALTH SERVICES. INC.

SECOND: The articles of incorporation were filed on: 42

THIRD: (CHECK ONE)

None of the corporation's shares have been issued.

□ The corporation has not commenced business.

FOURTH: No debt of the corporation remains unpaid.

FIFTH: The net assets of the corporation remaining after winding up have been distributed to the shareholders, if shares were issued.

SIXTH: Adoption of Dissolution (CHECK ONE)

A majority of the incorporators authorized the dissolution.

A majority of the directors authorized the dissolution.

Signed this 2%day of DA 200

Signature

(By the chairman or vice chairman of the board, president, or other officer - if there are no officers or directors, by an incorporator.)

MARY RUTH BAKER

(Typed or printed name)

PRESIDENT

(Title)