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| (Requestor's Name) | | | |
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| (City/State/Zip/Phone #) | | | |
| PICK-UP WAIT MAIL | | | |
| i | | | |
| (Business Entity Name) | | | |
| L-880 | | | |
| (Document Number) | | | |
| Certified Copies Certificates of Status | | | |
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| Special Instructions to Filing Officer: | | | |
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Office Use Only



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COVER LETTER

| TO: Registration Section Division of Corporations | | | |
|---------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| SUBJECT: _ | Health to Me P.L. (Name of Limited Liability Company) | | |
| | | | |
| The enclosed A | Articles of Amendment and fee(s) are submitted for filing. | | |
| Please return a | Il correspondence concerning this matter to the following: | | |
| , | Shiro Iwae (Name of Person) | | |
| | Five Element Solutions, Inc. (Firm/Company) 1653 Linkside Court North (Address) | | |
| | 1653 Linkside Court North | | |
| | Atlantic Beach FL32233 (City/State and Zip Code) | | |
| For further inf | ormation concerning this matter, please call: | | |
| | Shiro Iwae at 904, 246-9650 (Area Code & Daytime Telephone Number) | | |
| Enclosed is a ch | eck for the following amount: | | |
| □ \$25.00 Filing | Spee \$30.00 Filing Fee & \$55.00 Filing Fee & \$60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) Certificate of Status & Certified Copy (additional copy is enclosed) | | |

MAILING ADDRESS:

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

STREET/COURIER ADDRESS:

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

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

| 1. The name of a limited liability company is Health To Me | , P. L. | | |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------|--|--|
| 2. The Articles of Organization were filed on Janua. | and assigned document number | | |
| 3. The date the dissolution was approved: Febru | ary 28, 2006 | | |
| 4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 608.441, Florida Statutes, (copy 608.441 on back cover letter). | | | |
| no Longer operating th | e company. | | |
| | | | |
| 5. CHECK ONE: | | | |
| OR- | ted liability company have been paid or discharged. s, obligations and liabilities pursuant to s. 608.4421. | | |
| All remaining property and assets have been distributed rights and interests. | among its members in accordance with their respective | | |
| 7. CHECK ONE: | | | |
| There are no suits pending against the company in any courtOR- | | | |
| Adequate provision has been made for the satisfaction of any judgment, order or decree which may be entered against it in any pending suit. | | | |
| Signatures of the members having the same percentage of membership interests necessary to approve the dissolution: | | | |
| Signature | Printed Name | | |
| Da Jue | Shiro Iwae | | |
| | O6 HAR -7 PH 1-25 | | |
| | HAR -7 | | |
| | PH 1:25 SEE FLORIDA | | |
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