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MAR 0 3 2017 S. YOUNG

Ihoko Kondo Health-America.net LLC 294 Kelsey Park Circle Palm Beach Gardens, FL 33410 (561) 228-1002 (561) 909-5101 Kondo500@gmail.com

**Division of Corporations** PO BOX 6327 Tallahassee, FL 32314 2/20/2017

Dear Sir/ Madam

Enclosed please find the Article of Dissolution together with a check amount of \$25 forthe filing fee.

Kindly please process this effective on 12/31/2016 for accounting purpose.

Should you have any question, please contact me at above address.

Thank you very much.

Best regards,

Ihoko Kondo

### **COVER LETTER**

TO:

Registration Section
Division of Corporations

HEALTH-AMERICA.NET, LLC.

(Name of Limited Liability Company)

The enclosed Articles of Dissolution and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

KONDO, IHOKO	
(Name of Person)	
	T SE
(Firm/Company)	三萬
294 KELSEY PARK CIRCLE	5 - N
(Address)	7
PALM BEACH GARDENS, FL 33410	- =
(City/State and Zip Code)	27

For further information concerning this matter, please call:

KONDO, IHOKO

,,561

909-5101

(Name of Person)

(Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

■ \$25.00 Filing Fee and Certificate of Dissolution

□ \$55.00 Filing Fee, Certificate of Dissolution & 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 liabilities. HEALTH-AMERICA.NET, L				
2.	The Articles of Organization	were filed on04/08/2013	<del></del>	and assigned	
	document numberL130000	51008	For A	ccounting Purpose only.	
3.		date cannot be prior to or more this block does not meet the ap	han 90 days later than dat oplicable statutory filing	ng: 12/31/2016 e document is received for filing) g requirements, this date will no	ot be
4.	A description of occurrence 605.0707, Florida Statutes, (	that resulted in the limited copy 605.0707 on back co	l liability company's ver letter).	dissolution pursuant to secti	on
	Pursuant to the consent of all m	embers			SELLAHA
	<del></del>				-9 PM
5.	If there are no members, enter activities and affairs:	er the name and address of Ihoko Kondo	the person appointed	d to wind up the company's	1: 27
		294 Kelsey Park Circle, Pa	m Beach Gardens, FL		
6. lis	Signature of an authorized p ted above to wind up the com	erson or if there are no me apany's activities and affai	mbers, the signature	of the person appointed and	
<u>-</u>	lun H		Ihoko Kondo		
	Signature		Printe	ed Name	

**FILING FEE: \$25.00**