

N000000006557

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400120828284

04/22/08--01031--002 **35.00

FILED
2008 APR 22 AM 10:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Voldis
Tewis
4-22-08

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Dissolution of NFP Corporation

DOCUMENT NUMBER: N 000 000 0 6557

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

Please return all correspondence concerning this matter to the following:

Chester Kylstra

(Name of Contact Person)

Healing House Network, Inc

(Firm/Company)

2849 Laurel Park Highway

(Address)

Hendersonville, NC 28739

(City/State and Zip Code)

For further information concerning this matter, please call:

Chester Kylstra

(Name of Contact Person)

at (828) 551-0345

(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



Healing House Network

PO Box 2339
Santa Rosa Beach, FL 32459
800-291-4706
850-835-4060
office@healinghouse.org
www.healinghouse.org

February 12, 2008

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

PO Box 6327

Tallahassee, FL 32314

Dear Sir,

Enclosed find the paper work to dissolve the Healing House Network, Inc. Corporation.

We recently moved our ministry operations to North Carolina, to a new headquarters we have purchased. As part of this move, we are adjusting our legal and functional organizational structure. The function and operations of the Healing House Network have been transferred into a sister 501(C)3 ministry, Restoring The Foundations International, Inc.

Thank you for helping us fulfill the ministry call of the Healing House Network.

Sincerely,

A handwritten signature in cursive script, appearing to read "Chester Kysira".

Chester Kysira
President

RECEIVED
2008 FEB 19 AM 8:08
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 21, 2008

CHESTER KYLSTRA
HEALING HOUSE NETWORK, INC.
P. O. BOX 2339
SANTA ROSA BEACH, FL 32459

SUBJECT: HEALING HOUSE NETWORK, INC.
Ref. Number: N00000006557

We have received your document for HEALING HOUSE NETWORK, INC., however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$35.00.

If you have any questions concerning this matter, please either respond in writing or call (850) 245-6905.

Thelma Lewis
Document Specialist Supervisor

Letter Number: 908A00011077

*Sorry for the oversight
Check attached, Chester Kylstra*

*Please direct all future correspondence
to:
Chester Kylstra
Healing House Network
2849 Laurel Park Highway
Hendersonville, NC 28739*

RECEIVED
2008 APR 22 AM 11:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF DISSOLUTION

Pursuant to section 617.1403, Florida Statutes, this Florida not for profit corporation submits the following Articles of Dissolution:

FIRST: The name of the corporation as currently filed with the Florida Department of State:

Healing House Network, Inc.

SECOND: The document number of the corporation (if known): None 000 0 655

THIRD: Adoption of Dissolution
(COMPLETE SECTION I OR II)

SECTION I

If the corporation has members entitled to vote:

(CHECK/COMPLETE ONE)

☐ The date of the meeting of members at which the resolution to dissolve was adopted

_____. The number of votes cast by the members was sufficient for approval.

☐ The resolution was adopted by written consent of the members and executed in accordance with section 617.0701, Florida Statutes.

SECTION II

If the corporation has no members or members entitled to vote on the dissolution:

The corporation has no members or members entitled to vote on the dissolution.

The date of adoption of the resolution by the board of directors was June 12, 2007

The number of directors in office was 6 and the vote for resolution was

6 for and 0 against. (must be a majority vote)

FILED
2008 APR 22 AM 10:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FOURTH:

Effective date of dissolution if applicable:

12/31/2007

(no more than 90 days after dissolution file date)

Signature

Chester D. Kylstra

(By the chairman or vice chairman of the board, president or other officer- if directors have not been selected, by an incorporator- if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.)

Chester D. Kylstra

(Typed or printed name of the person signing)

President

(Title of person signing)

FILING FEE: \$35