

1107000011893

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

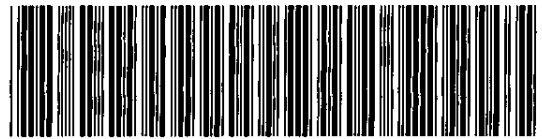
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2008 MAY -7 AM 11:24  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

D.S.S.  
S.S.

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** HEALTH & BODY AWARENESS CORP. ARTICLE of DISSOLUTION

**DOCUMENT NUMBER:** N 070000 11 893

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

Please return all correspondence concerning this matter to the following:

Sahro Villarroya  
(Name of Contact Person)

HEALTH & BODY AWARENESS CORP  
(Firm/Company)

~~100 MARLBOROUGH RD~~ 100 Lincoln Rd #1605  
(Address)

Miami Beach 33139  
(City/State and Zip Code)

For further information concerning this matter, please call:

Sahro Villarroya at (86 ) 704 1702  
(Name of Contact Person) (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

**ARTICLES OF DISSOLUTION**

Pursuant to section 617.1401, 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:

HEALTH & BODY AWARENESS CORP

SECOND: The document number of the corporation (if known): ND7000011893

THIRD: The file date of the articles of incorporation: 12/12/2007

FOURTH: The corporation has not commenced to conduct its affairs.

FIFTH: No debts of the corporation remains unpaid.

SIXTH: Adoption of Dissolution **(CHECK ONE)**  
(Note: Cannot be authorized by an incorporator if the corporation has directors)

- ☒ The dissolution was authorized by a majority of the directors:  
OR
- ☐ The dissolution was authorized by an incorporator.
- ☐ The dissolution was authorized by a majority of the incorporators.

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Signature: \_\_\_\_\_

(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)

Subra Villalroya  
(Typed or printed name of person signing)

PRESIDENT  
(Title of person signing)

**Filing Fee: \$35**