

N10000002929

Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850) 617-6380

From: Account Name : UNITED ACCOUNTING SERVICES,
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2010 MAY 11 PM 2:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED
2010 MAY 11 AM 8:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**DISSOLUTION OR WITHDRAWAL
ANANDA LIFE, INC.**

Certificate of Status	0
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Page Count	04
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Electronic Filing Menu

Corporate Filing Menu

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5/11/10

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Ananda Life, Inc.

DOCUMENT NUMBER: N 10000002929

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

Please return all correspondence concerning this matter to the following:

Marta I. Martinez
(Name of Contact Person)
13081 SW 133 Court
(Firm/Company)
Miami, FL 33186
(City/State and Zip Code)

For further information concerning this matter, please call:

Marta I. Martinez at (305) 951-1725
(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

05/11/2010 11:09
850-617-6381

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5/11/2010 10:06:21 AM PAGE 1/001 Fax Server

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May 11, 2010

FLORIDA DEPARTMENT OF STATE
Division of Corporations

ANANDA LIFE, INC.
13081 S W 133 COURT
MIAMI, FL 33186

SUBJECT: ANANDA LIFE, INC.
REF: N10000002929

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

You have submitted two documents to dissolve the subject corporation. Please choose the correct type of dissolution according to Florida Statutes and resubmit only one document.

If you choose to file articles of dissolution according to 617.1403 please complete ONLY section I or II and do not check both boxes in section I.

If you have any questions concerning the filing of your document, please call (850) 245-6907.

Annette Ramsey
Regulatory Specialist II

FAX Aud. #: H10000113124
Letter Number: 110A00011798

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FILED
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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:

Grand Life, Inc.

SECOND: The document number of the corporation (if known): N10000002929

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
March 31, 2010 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.

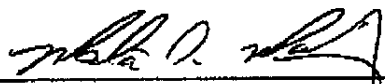
The date of adoption of the resolution by the board of directors was _____

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

_____ for and _____ against. (must be a majority vote)

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FOURTH: Effective date of dissolution if applicable: 03/31/2010
(no more than 90 days after dissolution file date)

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.)

Mark A. Martini
(Typed or printed name of the person signing)

Director
(Title of person signing)

FILING FEE: \$35