

N17000011632

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

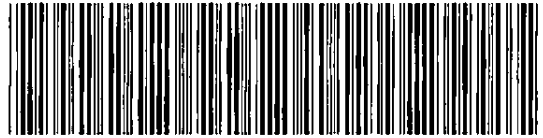
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2023 OCT 27 PM 1:17
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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: LIVING IN GOD'S HEALING TOUCH, CORP.

DOCUMENT NUMBER: N17000011632

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

Please return all correspondence concerning this matter to the following:

FATIMA R. DIAS

(Name of Contact Person)

(Firm/Company)

8229 ALATOONA PASSS WAY

(Address)

BOYNTON BEACH, FL 33473

(City/State and Zip Code)

For further information concerning this matter, please call:

FATIMA R. DIAS

(Name of Contact Person)

at (561)

(Area Code)

866-3585

(Daytime Telephone Number)

Enclosed is a check for the following amount:

- | | | | |
|--|---|--|--|
| <input type="checkbox"/> \$35 Filing Fee | <input checked="" type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is enclosed) | <input type="checkbox"/> \$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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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:
LIVING IN GOD'S HEALING TOUCH, CORP.

SECOND: The document number of the corporation (if known): N17000011632

THIRD: The file date of the articles of incorporation: 11/21/2017

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

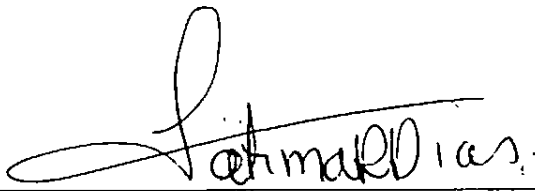
FIFTH: No debts of the corporation remains unpaid.

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.

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)

FATIMA R. DIAS

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

Filing Fee: \$35

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