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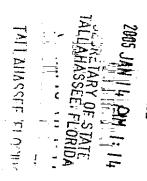
ADAM OGDEN (Requestor's Name)
(Requestors Name) 1817 SHERWOOD PRIVE (Address)
(Address)
(Address)
TAUAHASSEE, FL 323°3/85°-574-23. (City/State/Zip/Phone #)
(Olty/Old/Online #)
PICK-UP WAIT MAIL PA Nutvition'S HEALTHSTOP # Z, TWC. (Business Entity Name)
HEALTHSTOP # 2, INC.
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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ARTICLES OF DISSOLUTION

Pursuant to section 607.1403, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

FIRST:	The name of the corporation is: D+A Nutrition & HEACTUSTOF #2	
INC.		
SECOND:	The date dissolution was authorized: Dec 31, '04	
THIRD:	Adoption of Dissolution (CHECK ONE)	
	solution was approved by the shareholders. The number of votes cast for dissolution sufficient for approval.	
☐ Diss	solution was approved by vote of the shareholders through voting groups.	
	The following statement must be separately provided for each voting group to the plan to dissolve:	
The	number of votes cast for dissolution was sufficient for approval by	
	Shaveholders, Presidon +	
	(voting group)	
Sig	ened this 13 day of Jan 2005.	
Signature _	(By the Chairman of Vice Chairman of the Board, President, or other officer)	
	(Typed or printed name)	
	Asidem	
	(Title)	