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(Re	equestor's Name)	
(Ad	idress)	
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PICK-UP	WAIT	MAIL
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(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	'



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DIVISION OF CORPORATIONS
2006 AUG -18 AM O. 10

Office Use Only

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COVER LETTER

TO: Amendment Section

Division of Corporations
SUBJECT: Dissolution of Incorporation A-WAY FROM PAIL
DOCUMENT NUMBER: Po 2000 53006
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Jacob Korthuis (Name of Contact Person)
PMA Institute (Firm/Company)
(Firm/Company)
3143 Hanging Moss Circle (Address)
(Address)
(City/State and Zip Code)
(City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Contact Person) (Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$\text{\$\subseteq\$ \$\text{\$\text{S52.50 Filing Fee} & \$\text{\$\text{\$\text{\$\text{\$\text{S52.50 Filing Fee}}} & \$\$\text{\$\
MAILING ADDRESS:STREET ADDRESS:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle

Tallahassee, FL 32301



August 9, 2006

Jacob Korthuis PMA Institute 3143 Hanging Moss Circle Kissimmee, FL 34741

SUBJECT: A WAY FROM PAIN, INC.

Ref. Number: P02000053006

We have received your document for A WAY FROM PAIN, INC. and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Our records indicate the current name of the entity is as it appears on the enclosed computer printout. Please correct the name throughout the document.

Articles of Dissolution must comply with either section 607.1401 or 607.1403, Florida Statutes.

The form that you submitted is for a limited partnership not a corporation.

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

Annette Ramsey Document Specialist

Letter Number: 906A00049602

PMA Institute

Amendment Section Division of Corporations PO Box 6327 Tallahassee, FL 32314

Kissimmee, August 14, 2006

Dear Amendment Section,

Enclosed you will find my papers for the Dissolution of Corporation of A WAY FROM PAIN, INC.

Enclosed you will also find a copy of your letter indicating that when I tried to file this dissolution before, I sent in the wrong forms to the Registrations Section. So this is my second attempt.

The Registrations Section did not file the document but has however already cashed the payment for the Dissolution in the amount of \$52.50. The number of the check was 1183 and the name of check holder was BCE Institute (3143 Hanging Moss Circle, Kissimmee, FL 34741), payable to Florida Department of State. Please take this payment for the current Dissolution enclosed.

Thank you for your help.

Miller

With kind xer

Yacob Korthuis

Enclosed:

letter Fl. Dep. of State, dated Aug 9, 2006

Cover letter

Articles of Dissolution

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

ARTICLES OF DISSOLUTION AUG 18 AM 9: 19

Pursuant to section 607.1401, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

FIRST:	The name of the corporation as currently filed with the Florida Department of State:
	A WAY FROM PAIN INC
SECOND:	The document number of the corporation (if known): Pozooo53006 The file date of the articles of incorporation: May 13,2002
ГНIRD:	The file date of the articles of incorporation: May 13, 2002
FOURTH:	(CHECK AT LEAST ONE BOX)
	None of the corporation's shares have been issued.
	The corporation has not commenced business.
FIFTH:	No debt of the corporation remains unpaid.
	The net assets of the corporation remaining after winding up have been distributed to the shareholders, if shares were issued.
SEVENTH:	Adoption of Dissolution (CHECK ONE)
	A majority of the incorporators authorized the dissolution.
	A majority of the directors authorized the dissolution.
Signa	(By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a regeiver, trustee, or other court appointed fiduciary, by that fiduciary.)
	Typed or printed name of person signing)
	CEO OWNER (Title of Person Signing)

Filing Fee: \$35