

P02000111245

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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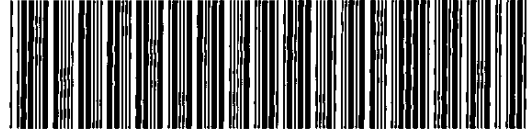
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

VALD'S
CRC
4/23

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Dissolution of Corporation

DOCUMENT NUMBER: PD2000111245

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

Please return all correspondence concerning this matter to the following:

Carol F Shill
(Name of Contact Person)

Emerald Garden Natural Health Consulting Inc
(Firm/Company)

16800 SW 74th Ct
(Address)

Palmetto Bay (Miami), FL 33157
(City/State and Zip Code)

For further information concerning this matter, please call:

Carol Shill at (305) 608-4656
(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

RECEIVED
07 APR -9 AM 8:00
DIVISION OF CORPORATIONS



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 11, 2007

CAROL F. SHILL
EMERALD GARDEN NATURAL HEALTH CONSULTING
16800 SW 74TH CT.
PALMETTO BAY (MIAMI), FL 33157

SUBJECT: EMERALD GARDEN NATURAL HEALTH CONSULTING, INC.
Ref. Number: P0200011245

We have received your document for EMERALD GARDEN NATURAL HEALTH CONSULTING, INC., however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$35.00.

The fee to file articles of dissolution or a certificate of withdrawal is \$35. Certified copies are optional and are \$8.75 for the first 8 pages of the document, and \$1 for each additional page, not to exceed \$52.50.

If you have any questions concerning the filing of your document, please call (850) 245-6880.

Karen Gibson
Document Specialist Supervisor

Letter Number: 307A00024376

sorry

RECEIVED
07 APR 19 AM 8:00
DIVISION OF CORP. AFFAIRS

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 as currently filed with the Florida Department of State:
Emerald Garden Natural Health Consulting Inc.

SECOND: The document number of the corporation (if known): P02000111245

THIRD: The date dissolution was authorized: 4-1-07

Effective date of dissolution if applicable: 4-1-07
(no more than 90 days after dissolution file date)

FOURTH: Adoption of Dissolution (CHECK ONE)

☒ Dissolution was approved by the shareholders. The number of votes cast for dissolution was sufficient for approval.

☐ Dissolution was approved by the shareholders through voting groups.

The following statement must be separately provided for each voting group entitled to vote separately on the plan to dissolve:

The number of votes cast for dissolution was sufficient for approval by

(voting group)

Signature: _____

(By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary)

Carol Shill
(Typed or printed name of person signing)

President
(Title of person signing)

Filing Fee: \$35

FILED
07 APR 23 AM 9:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA