P05000042768

(R	equestor's Name)
(A	ddress)
(A	ddress)
(C	ity/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(B	usiness Entity Name)
•	,
(D	ocument Number)
Certified Copies	Certificates of Status
Special Instructions to	Filing Officer:
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SECRETARY OF STATE
TALLAHASSEF FIREIR

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COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Dissoldion of Ma	Hhew Brownstein Hypnotherapy, Inc.
DOCUMENT NUMBER:	
The enclosed Articles of Dissolution and i	fee are submitted for filing.
Please return all correspondence concerning	g this matter to the following:
Matthews	Slownstein Contact Person)
(Name of	Contact Person)
(Fire	n/Company)
4051 Nu	1 4312 St. #37 ddress)
	,
. Gainesvi	Ne, FL 32606
(City/Sta	te and Zip Code)
For further information concerning this ma	tter, please call:
Malthew Brownstein	at (352) 378-5746 (Area Code & Daytime Telephone Number)
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amou	nt:
☑\$35 Filing Fee ☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & S52.50 Filing Fee, Certified Copy Certificate of Status & (Additional copy is enclosed) 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

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:
	Matthew Brownstein Hypnotherapy, Inc.
SECOND:	The document number of the corporation (if known): P050000 42768
THIRD:	The date dissolution was authorized: 8/12/08
	Effective date of dissolution if applicable: 8/12/08 (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 ARETAR ARETA
	(voting group)
	Dim 9
	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)
	Matthew Blownstein (Typed or printed name of person signing)
	(Typed or printed name of person signing)
	President
	(Title of person signing)

Filing Fee: \$35