

P05000099614

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(Address)

(Address)

(City/State/Zip/Phone #)

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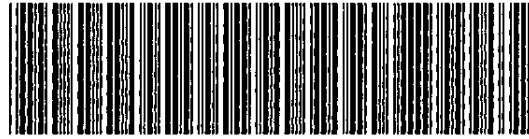
(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

11 APR 25 AM 9:06

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tr 4-25-11

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Martial Arts For Wellness Inc
DOCUMENT NUMBER: PO5000099614

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

Please return all correspondence concerning this matter to the following:

Alice Zames-Strong
Name of Contact ~~Person~~

Martial Arts For Wellness Inc
Firm/Company

1150 CARA CT
Address

Marco Island FL 34145
City/State and Zip Code

AZStrong@Comcast.net
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Alice Zames-Strong at (239) 248-2176
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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 18, 2011

ALICE ZAIMES-STRONG
MARTIAL ARTS FOR WELLNESS INC
1150 CARA CT
MARCO ISLAND, FL 34145

SUBJECT: MARTIAL ARTS FOR WELLNESS, INC.
Ref. Number: P05000099614

We have received your document for MARTIAL ARTS FOR WELLNESS, INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Articles of Revocation of Dissolution cannot be filed for an active Florida corporation. If you are trying to voluntarily dissolve the corporation enclosed is information on filing Articles of Dissolution.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6892.

Tina Roberts
Regulatory Specialist II

Letter Number: 511A00009313

RECEIVED
11 APR 25 AM 9:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Articles of Dissolution

DOCUMENT NUMBER: PO5000099614

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

Please return all correspondence concerning this matter to the following:

Alice Zaimis - Strong
(Name of Contact Person)

Martial Arts for Wellness Inc
(Firm/Company)

1150 CARA CT
(Address)

MARCO ISLAND FL 34145
(City/State and Zip Code)

For further information concerning this matter, please call:

Alice Zaimis - Strong at (239) 248-2176
(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 *mailed previously* ☐ \$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

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:

Martial Arts for Wellness Inc.

SECOND: The document number of the corporation (if known): PO5000099614

THIRD: The date dissolution was authorized: 4-12-11

Effective date of dissolution if applicable: _____
(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 group.

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)

Alice Zaines-Strong

(Typed or printed name of person signing)

President

(Title of person signing)

Filing Fee: \$35

FILED
21 APR 25 AM 9:06
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FLORIDA