(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	isiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
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Special Instructions to	Filing Officer:	
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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Dissolution of Diet and Health Solutions, Inc
DOCUMENT NUMBER: P0600000776
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Michele Dudley
(Name of Contact Person)
(Firm/Company)
2922 SW 30th Cart (Address)
(Address)
Coconut Grove, FL 33133
(City/State and Zip Code)
For further information concerning this matter, please call:
Michele Dudley at (305) 510-1920
(Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
□\$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & S52.50 Filing Fee, Certificate of Status Certified Copy (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:		
	Diet and Health Solutions, Inc.		
SECOND:	The document number of the corporation (if known): P060000776		
THIRD:	The date dissolution was authorized: 50/4 21st 2008		
	Effective date of dissolution if applicable: 5uly 31st, 2008 (no more than 90 days after dissolution file date)		
Ti	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)		
	Michele Dudley		
	(Typed or printed name of person signing)		
	President		
	(Title of person signing)		

Filing Fee: \$35