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(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 o	^f Status
Special Instructions to	Filing Officer:	
	Office Use Only	
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SECRETARY OF STATE
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COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: Dissolution of New Li	fe Therapy Group, Inc
DOCUMENT NUMBER: <u>P070000750</u>	189
The enclosed Articles of Dissolution and fee are submitted	for filing.
Please return all correspondence concerning this matter to t	he following:
Tina Cryz	
(Name of Contact Person)	
(Firm/Company)	
520 Wood Sorrel Was	4
Round Rock, TX 786 (City/State and Zip Code	le 4
For further information concerning this matter, please call:	
Tina Cruz at (5/2) (Name of Contact Person) (Area	2 440-3017 a Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
\$\int_\$35 Filing Fee \(\)\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$	g Fee & \$\sumsymbol{\subsymbol{\symbol{\subsymbol{\symbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymb
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

FILED

Pursuant to section 607.1401, Florida Statutes, this Florida profit corporation submitted following TALLAHASSEE. FLORIDA

FIRST:	The name of the corporation as currently filed with the Florida Department of State:
	The name of the corporation as currently filed with the Florida Department of State: New Life Therapy Group, Inc. The document number of the corporation (if known):
SECOND:	The document number of the corporation (if known):
THIRD:	The file date of the articles of incorporation: $\frac{7/2}{07}$
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.
SIXTH:	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.
Sign	ature: (By a director, president or other officer - indirectors 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.) Tha Cruz
	(Typed or printed name of person signing)
	(Title of Person Signing)

Filing Fee: \$35