

POSITIVE

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850)617-6380

From:

Account Name : THE LAW OFFICES OF NICK SPRADLIN PLLC
Account Number : I20070000020
Phone : (813)435-3176
Fax Number : (813)333-6358

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

REGISTERED AGENT RESIGNATION HEALING HEALTH THERAPEUTICS AND ASSOCIATES, INC.

Certificate of Status	0
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J. HORNE

NOV - 8 2022

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TALLAHASSEE
2022 NOV - 7 PM 12:51

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TALLAHASSEE, FL

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 607.0503(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the undersigned, The law offices of nick spradlin

(Name of Registered Agent)

hereby resigns as Registered Agent for HEALING HEALTH THERAPEUTICS AND ASSOCIATES, IN

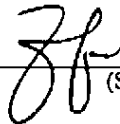
(Name of Corporation)

P08000040108

(Document Number, if known)

A copy of this resignation was mailed to the above listed corporation at its last known address.

The agency is terminated and the office discontinued on the 31st day after the date on which
this statement is filed.



(Signature of Resigning Agent)

If signing on behalf of an entity:

NICKOLAS J. SPRADLIN, ESQ.

(Typed or Printed Name)

CEO

(Capacity)

Fee for filing this document:

\$87.50 - Active Corporation

\$35.00 - Administratively dissolved/voluntarily dissolved/
withdrawn corporation

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314