

P110000010838

(Requestor's Name)

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(Address)

(City/State/Zip/Phone #)

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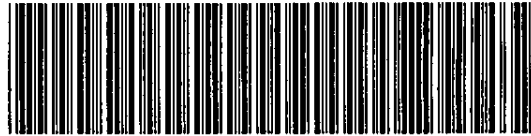
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FILED
13 FEB 18 PM 12:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FEB 19 2013

T. ROBERTS

COVER LETTER

Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

SUBJECT: NATURE'S HEALING TOUCH CORP
PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of dissolution and a check for:

- ☒ \$35 Filing Fee
- ☐ \$43.75 Filing Fee &
- ☐ \$43.75 Filing Fee &
- ☐ \$52.50 Filing Fee

MAILING ADDRESS: STREET ADDRESS:
ADDITIONAL COPY REQUIRED

FROM:

JARAMILLO, ANA C

Name (Printed or typed)

3867 SW 171ST TER

Address

MIRAMAR FL 33027 US

City, State & Zip

(954) 512-4591

Daytime Telephone number

ARTICLES OF DISSOLUTION

FILED
13 FEB 18 PM 12:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Pursuant to 607.1401, Florida Statutes, this Florida profit corporation submits the following articles of dissolution.

FIRST: The name of the corporation is: NATURE'S HEALING TOUCH CORP

SECOND: The filing date of the articles of incorporation was: 2/1/2011

THIRD: (CHECK ONE)

- ☒ None of the corporation's shares have been issued.
- ☐ The corporation has not commenced business.

FOURTH: No debt of the corporation remains unpaid.

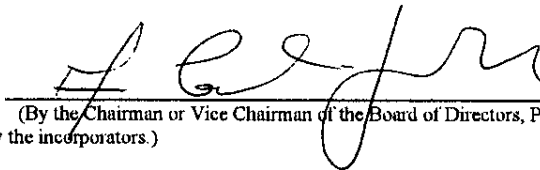
FIFTH: The net assets of the corporation remaining after winding up have been distributed to the shareholders, if shares were issued.

SIXTH: Adoption of Dissolution (CHECK ONE)

- ☐ A majority of the incorporators authorized the dissolution.
- ☒ A majority of the directors authorized the dissolution.

Signed this 12th day of February, 2013

Signature



(By the Chairman or Vice Chairman of the Board of Directors, President or other officer- if there are no officers or directors, by the incorporators.)

JARAMILLO, ANA C.
Typed or printed name

President
Title