P/2000027570

(Re	questor's Name)			
(64	lds-2-2			
(Address)				
(Address)				
(Cit	ty/State/Zip/Phone	- t		
(CII	.y/State/Zip/Prione	= #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Do	cument Number)			
(,			
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				
1				

Office Use Only



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COVER LETTER

TO;	Amendment Section Division of Corporations		
SUBJI	_{ECT:} Joy Reiki Inc.		
DOCU	JMENT NUMBER:		
The en	closed Articles of Dissolution and	fee are submitted for filin	g.
Please	return all correspondence concerning	ng this matter to the follow	ving:
Jov	Leverett		
		Contact Person)	
	(Fir	m/Company)	
724	1 Old Kings Rd. S	Apt. 1602	
Jac	ksonville, FL 32217	Address)	
-	(City/Sta	ate and Zip Code)	
For fu	rther information concerning this ma	atter, please call:	
Joy	Leverett	at (904_) 6	29-3516
	(Name of Contact Person)		Daytime Telephone Number)
Enclos	sed is a check for the following amou	unt:	
\$35	Filing Fee \$\square\$ \$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	Ame Divi Clift	EET ADDRESS: Indment Section Ission of Corporations Industry Indus

Tallahassee, FL 32301

ARTICLES OF DISSOLUTION

Pursuant to section 607.1401, 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:			
	Joy Reiki Inc.			
SECOND:	The document number of the corporation (if known): P12000027570			
THIRD:	The file date of the articles of incorporation: March 21, 2012			
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	(By a director, president or other officer - if directors of officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.)			
	Joy Leverett			
	(Typed or printed name of person signing)			
	President			
	(Title of Person Signing)			

Filing Fee: \$35

Notice of Corporate Dissolution

This notice is submitted by the dissolved corporation named below for resolution of payment of unknown claims against this corporation as provided in s. 607.1407, F.S.

This "Notice of Corporate Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Corporation: Joy Reiki Inc.	· · · · · · · · · · · · · · · · · · ·
Date of dissolution will be the date the dissolution is specified in the <i>Articles of Dissolution</i> .	filed with the Department of State or as
Description of information that must be included in a	claim:
Mailing address where claims can be sent: (Claims ca	unnot be sent to the Division of Corporations)
Joy Leverett	
7241 Old kings Rd	S
#1602	
Jacksonville, FL 32	2217

A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

Joy Leverett

Printed Name of the Person Filing

Joy Level Signature of the Person Filing

Fee: No charge if included with Articles of Dissolution. If filed separately \$35.00