## P19000039665

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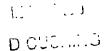


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## **COVER LETTER**

TO: Amendment Section

Division of Corporations	
SUBJECT: The Dissolution	of Change-UP Health Inc.
DOCUMENT NUMBER: \$\int 190000396	<u>65</u>
The enclosed Articles of Dissolution and fee are s	ubmitted for filing.
Please return all correspondence concerning this m	atter to the following:
Rion Adams	
(Name of Contact	Person)
(Firm/Comp	pany)
1824 NW 349 PL U	A 43
Guinesville, FL 3260°	3 = = = = = = = = = = = = = = = = = = =
(City/State and Z	Zip Code)
For further information concerning this matter, plea	ase call:
Rian Adams at	(850) 529-5961 (Area Code & Daytime Telephone Number)
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
Certificate of Status Certi (Add	75 Filing Fee & S52.50 Filing Fee,  Ified Copy Itional copy is Certified Copy Itional copy is (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 607.1401, 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:  Charge - Up Health Inc.	
SECOND:	The document number of the corporation (if known): P191170039665	
THIRD:	The file date of the articles of incorporation: MAY 06, 2019	
FOURTH:	(CHECK AT LEAST ONE BOX)	
	None of the corporation's shares have been issued.	
	The corporation has not commenced business.	ž.,
FIFTH:	No debt of the corporation remains unpaid.	<u> </u>
SIXTH:	The net assets of the corporation remaining after winding up have been distributed to the shareholders, if shares were issued.	. 1 
SEVENTH:		ر د د د د د د
	$\square$ A majority of the incorporators authorized the dissolution.	·
	A majority of the directors authorized the dissolution.	
Sign	nature: Kien Adaiss	
	(By a director, president or other officer - if directors or officers have not been selected, by an incorporator - in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.)	if
	Rinn Adams	
	(Typed or printed name of person signing)	
	CEO	
	(Title of Person Signing)	

Filing Fee: \$35