Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H100002389473)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850) 617-6380

From:

Account Name : JIM SIERRA & ASSOCIATES

Account Number : 110677000356

Phone : (305) 271-7310

Fax Number : (305)271-4422

DISSOLUTION OR WITHDRAWAL THE ESSENCE OF HEALING, INC

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

Help

NOV 05 2010

EXAMINER

COVER LETTER

TO: Amendment Section

Division of Corporations	
SUBJECT: THE ESSENCE OF H	EALING, INC
DOCUMENT NUMBER: P9700005	9620
The enclosed Articles of Dissolution and	fee are submitted for filing.
Please return all correspondence concernir	ng this matter to the following:
JII	M SIERRA
(Name of	Contact Person)
TAX	SMART, LLC
(Fir	m/Company)
5550 SW	87TH AVENUE
(A	(ddress)
MIA	MI, FL 33165
(City/St	ate and Zip Code)
For further information concerning this ma	atter, please call:
JIM SIERRA	at (305) 271-7310 (Area Code & Daytime Telephone Number)
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amor	unt:
\$35 Filing Fee \$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & S52.50 Filing Fee, Certified Copy (Additional copy is enclosed) S52.50 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	STREET ADDRESS: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle

(((H10000238947 3)))



November 4, 2010

FLORIDA DEPARTMENT OF STATE
Division of Corporations

THE ESSENCE OF HEALING, INC 2280 NW 129TH TERR PEMBROKE PINES, FL 33028

SUBJECT: THE ESSENCE OF HEALING, INC

REF: P97000059620

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

You have submitted two documents to dissolve the subject corporation. Please choose the correct type of dissolution according to Florida Statutes and resubmit only one document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6892.

Tina Roberts
Regulatory Specialist II

FAX Aud. #: H10000238947 Letter Number: 610A00026020



(((H10000238947 3)))

ARTICLES OF DISSOLUTION

Pursuant to section 607.1403. Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

THE ESSENCE OF HEALING, INC SECOND: The document number of the corporation (if known): P97000059620 THIRD: The date dissolution was authorized: 10/01/10 Effective date of dissolution if applicable: 10/01/10 (no more than 90 days after dissolution file date) FOURTH: Adoption of Dissolution (CHECK ONE) Dissolution was approved by the shareholders. The number of votes cast for dissolution was sufficient for approval. Dissolution was approved by the shareholders through voting groups. The following statement must be separately provided for each vising group entitled to vote separately on the plan to dissolve: The number of votes cast for dissolution was sufficient for approval by (voting group) Signature: (by a director, pesident or paths of fines; if directions or officers have not been selected by an theoryposter; or if in the hands of a receiver, trustee, or other coun appointed fiduciary, by that fiduciary)	FIRST:	The name of the corporation as currently filed with the Florida Department of State:	
THIRD: The date dissolution was authorized: 10/01/10 Effective date of dissolution if applicable: 10/01/10 Inn more than 90 days after dissolution file date) FOURTH: Adoption of Dissolution (CHECK ONE) Dissolution was approved by the shareholders. The number of votes east for dissolutions as sufficient for approval. Dissolution was approved by the shareholders through voting groups. The following statement must be separately provided for each viving group entitled to vote separately on the plan to dissolve: The number of votes east for dissolution was sufficient for approval by (voting group) Signature: (voting aroup) Signature: (voting aroup)		THE ESSENCE OF HEALING, INC	
Effective date of dissolution if applicable: 10/01/10 Inn more than 90 days after dissolution file days) FOURTH: Adoption of Dissolution (CHECK ONE) Dissolution was approved by the shareholders. The number of votes east for dissolution was sufficient for approval. Dissolution was approved by the shareholders through voting groups. The following statement must be separately provided for each viving group entitled to vote separately on the plan to dissolve: The number of votes east for dissolution was sufficient for approval by (voting group) Signature: (voting group) Signature: (by a director, president or other officers if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other count appointed fiduciary, by that fiduciary)	SECOND:	: The document number of the corporation (if known): P97000059620	
In more than 90 days after dissolution file date) FOURTH: Adoption of Dissolution (CHECK ONE) Dissolution was approved by the shareholders. The number of votes east for dissolution was sufficient for approval. Dissolution was approved by the shareholders through voting groups. The following statement must be separately provided for each viving group entitled to vote separately on the plan to dissolve: The number of votes east for dissolution was sufficient for approval by (voting group) Signature: [By a director, president or other utilizer • if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other count appointed fiduciary, by that fiduciary)	THIRD:	The date dissolution was authorized: 10/01/10	
Dissolution was approved by the shareholders. The number of votes east for dissolut was sufficient for approval. Dissolution was approved by the shareholders through voting groups. The following statement must be separately provided for each vising group entitled to vote separately on the plan to dissolve: The number of votes east for dissolution was sufficient for approval by (voting group) Signature: (by a director, president or other utilizer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other coun appointed fiduciary, by that fiduciary)		Directive date of allocated to appropriate.	
Dissolution was approved by the shareholders through voting groups. The following statement must be separately provided for each visting group entitled to vote separately on the plan to dissolve: The number of votes east for dissolution was sufficient for approval by (voting group) Signature: (By a director, president or other ufficer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other count appointed fiduciary, by that fiduciary)	FOURTH:	: Adoption of Dissolution (CHECK ONE)	
The following statement must be separately provided for each visting group entitled to vote separately on the plan to dissolve: The number of votes cast for dissolution was sufficient for approval by (voting group) Signature: (by a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other coun appointed fiduciary, by that fiduciary)			tion
The number of votes east for dissolution was sufficient for approval by (voting group) Signature: (By a director, president or other officers if directors or officers have not been selected, by an Incorporator - If in the hands of a receiver, insides, or other coun appointed fiduciary, by that fiduciary)		Dissolution was approved by the shareholders through voting groups.	
Signature: (by a director, president or other officers if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, inuries, or other coun appointed fiduciary, by that fiduciary)			AON O
Signature: (By a director, president or other officers if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other count appointed fiduciary, by that fiduciary)		The number of votes cast for dissolution was sufficient for approval by	7
Signature: (By a director, president or other officers if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other count appointed fiduciary, by that fiduciary)			AH
(By a director, president or other officer - if directors or officers have not been selected, by an knearporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary)		(voting group)	9:44
		(By a effector, president or other ufficer = if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other coun appointed fiduciary, by	
SAHADEO BICKRAM		SAHADEO BICKRAM	
([yped or printed name of person signing)		(Typed or printed name of person signing)	
PRESIDENT		PRESIDENT	
(Title of person signing)		(Title of person signing)	

Filing Fee: \$35