

Alison Lundergan Grimes
Kentucky Secretary of State
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Commonwealth of Kentucky
ALISON LUNDERGAN GRIMES, SECRETARY OF STATE

Division of Business Filings
Business Filings
PO Box 718
Frankfort, KY 40602
(502) 564-3490
www.sos.ky.gov

Articles of Dissolution
(Profit Corporation)

DIS

This form is to be used for dissolution by the Board of Directors or Shareholders.

Please note: Filing this form with the Office of the Secretary of State does not ensure the dissolution of the business entity is complete. Filers are encouraged to seek the advice of a professional prior to filing Articles of Dissolution.

Pursuant to the provisions of KRS 14A and KRS 271B.14-030, the corporation listed below adopts the following articles of dissolution:

Article I: The name of the profit corporation of record with the Office of the Secretary of State:

INSTITUTE of ENDURING HEALTH and WEALTH, Inc. (THE)
(The name must be identical to the name on record with the Secretary of State.)

Article II: The dissolution was authorized on SEPTEMBER 25, 2013

Article III: The dissolution was approved by: (check only one)

shareholder(s) or Debra L. Hayes (the only shareholder)
 board of directors as outlined in 271B.14-030.

Article IV: If the dissolution was approved by the shareholders, the voting information is listed below:

- a) Number of votes entitled to be cast on proposal to dissolve 1
- and
- b) The number of votes cast for the dissolution 1
- c) The number of votes cast against the dissolution 0
- or
- d) The total number of undisputed votes cast for dissolution 0
- e) The number cast for dissolution was sufficient for approval.

Article V: If the dissolution was approved by voting group(s) the voting information is listed below:

- a) Number of votes entitled to be cast on proposal to dissolve _____
- and
- b) The number of votes cast for the dissolution _____
- c) The number of votes cast against the dissolution _____
- or
- d) The total number of undisputed votes cast for dissolution _____
- e) The number cast for dissolution was sufficient for approval.

Article VI: This application will be effective upon filing, unless a delayed effective date and/or time is provided. The effective date or the delayed effective date cannot be prior to the date the application is filed. The date and/or time is _____
(Delayed effective date and/or time)

I declare under penalty of perjury under the laws of the state of Kentucky that the foregoing is true and correct.

   9/25/2013
Signature of Officer and Chairman of the Board Printed Name Title Date

**FILING INSTRUCTIONS
ARTICLES OF DISSOLUTION**

NAME

The profit corporation name provided on the articles of dissolution must read **exactly** as stated in the most recent articles. This can be found using the organization search tool located on the Secretary of State website at www.sos.ky.gov.

WHO MAY SIGN

The articles of dissolution must be signed by an officer or the chairman of the board.

PRINCIPAL OFFICE ADDRESS

The principal office is the office (in or out of this state) so designated in writing with the Office of the Secretary of State where the principal designated office of the business entity is located. This address is where all correspondence from the Office of the Secretary of State (See Document Delivery) will be mailed.

EFFECTIVE DATE AND TIME

The document will be effective on the date and time of filing, unless a delayed effective date and/or time is specified. The effective date or the delayed effective date cannot be prior to the date the application is filed. A delayed effective date may not be later than the 90th day after the date of filing.

ADDITIONAL ARTICLES OF DISSOLUTION OR NEED TO MODIFY THE EXISTING FORM

If this form does not comply with the articles of dissolution that you wish to file please disregard this form, please send a drafted executed copy of the articles of dissolution according to KRS 271B.14 to the address below.

DOCUMENT DELIVERY

A file stamped postcard will be sent to the principal office address. If the applicant wishes for the document to be sent to an alternate address other than the principal office, a request must be submitted in writing affirming that request. Alternate address requests must be submitted with each document filed with the Office of the Secretary of State.

NUMBER OF COPIES

Submit the original signed articles of dissolution as well as three (3) exact or conformed copies. One (1) of the exact or conformed copy of the articles of dissolution will be sent to the secretary of revenue.

FILING FEE

The filing fee for Articles of Dissolution is \$40.00. Your check should be made payable to the "Kentucky State Treasurer."

MAILING ADDRESS

Alison Lundergan Grimes
Secretary of State
P. O. Box 718
Frankfort, KY 40602-0718

OFFICE LOCATION

Room 154, Capitol Building
700 Capital Avenue
Frankfort, KY 40601
Hours of Operation: 8:00 AM-4:30 PM ET

CONTACT INFORMATION

If you have any questions or need additional forms, please feel free to visit our website at www.sos.ky.gov or call (502) 564-3490.