| Secretary of State   | DISS STK            | D1528038   |
|--|---------------------|--|
| Certificate of Dissolution   |                     |  |
| (California Stock Corporation ONLY)  |                     | FILED CWA<br>Secretary of State<br>State of California<br>AUG 0 6 2019 |
| IMPORTANT — Read Instructions before completing this form.   |                     |  |
| There is No Fee for filing a Certificate of Dissolution - S  | Stock               | 7.55 6 6 25.5  |
| Copy Fees – First page \$1.00; each attachment page Certification Fee - \$5.00 plus copy fees  | \$0.50;             |  |
|  |                     | This Space For Office Use Only   |
| Corporate Name (Enter the exact name of the Corporation as it is recorded with the California Secretary of State.)                               |                     | 2. 7-Digit Secretary of State File Number                              |
| Natural Instincts Healthy let Center, Inc.   |                     | C2994845   |
| 3. Election  |                     |  |
| The dissolution was made by a vote of ALL of the   | e shareholders o    | f the California corporation.  |
| Note: If the above box is not checked, a Certificate of E or together with this Certificate of Dissolution. (California                          |                     |  |
| 4. Debts and Liabilities (Check the applicable statem include the required information   |                     | ox may be checked. If second box is checked, must )                    |
| The known debts and liabilities have been actual   | ly paid or paid as  | far as its assets permitted.   |
| The known debts and liabilities have been adeque assumption. Included in the attachment to this of the provisions made and the name and address. | certificate, incorp |  |

5. Required Statements (Do not alter the Required Statements – ALL must be true to file Form DISS STK.)

a. The Corporation has been completely wound up and is dissolved.

The corporation never incurred any known debts or liabilities.

b. All final returns required under the California Revenue and Taxation Code have been or will be filed with the California Franchise Tax Board.

assumed or guaranteed the payment, or the depository institution with which deposit has been made.

- c. The known assets have been distributed to the persons entitled thereto or the corporation acquired no known assets.
- 6. Read, Verify, Date and Sign Below (See Instructions for signature requirements.)

| •                      | e State of California that the matters set forth in | n this certificate are true and correct of my own |
|------------------------|---|---|
| <u>V/15/19</u><br>Date | Signature   | Samantha Leach Type or Print Name                 |
| Date                   | Signature   | Type or Print Name                                |
| Date                   | Signature   | Type or Print Name                                |