

## BA20241995385



	STATE OF CALIFORNIA Office of the Secretary of State SHORT FORM CERTIFICATE OF CA NONPROFIT CORPORATION California Secretary of State 1500 11th Street Sacramento, California 95814 (916) 657-5448	DISSOLUTION -	For Office Use Only <b>-FILED-</b> File No.: BA20241995385 Date Filed: 11/12/2024
Corporation Corporation Nam	٩	PATHWAY 2 WELLNESS	
Entity No.		6449301	
Required Statements The following sta	atements are true:		
	t Short Form Dissolution Certificate is beir ere filed with the Secretary of State.	ng filed within 24 months from t	he date the Articles of
2) The nonprofit	corporation does not have any debts or o	ther liabilities, except as provid	ed in Item (3).
other business e	y of the nonprofit corporation will be satis entity assumes the tax liability, if any, of the rate taxes, if any, that are assessed and th	e dissolving nonprofit corporation	on and is responsible for
4) All final return California Francl	s required under the California Revenue a nise Tax Board.	and Taxation Code have been o	or will be filed with the
5) The nonprofit	corporation was created in error.		
	corporation has not issued any members lose payments have been returned to tho		ation received payments for
7) The nonprofit	corporation is dissolved; and		
	ssets remaining after payment of, or adeq to the persons entitled thereto; or the nor		
	e named in the original Articles of Incorporat majority of the incorporators has authorized		
Electronic Signature			
I declare und my own know	ler penalty of perjury under the laws of the s vledge.	state of California that the informa	ation herein is true and correct of
LISSA MITCHE	CLL	11/12/2024	
Director/Incorpora	ator Signature	Date	