POSO00072292

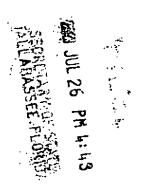
(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		





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19 JUL 26 FB 12: 5:







FLORIDA FILING & SEARCH SERVICES, INC.

P.O. BOX 10662 TALLAHASSEE, FL 32302 155 Office Plaza Dr Ste A Tallahassee FL 32301

PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE:

7/26/19

NAME:

PERFECT FLOORPLANS INC

TYPE OF FILING: DISSOLUTION

COST:

35.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODGE

PDH

COVER LETTER

<u>COVER LETTER</u>	
TO: Amendment Section Division of Corporations	
SUBJECT: Perfect Floorplans	A Section 1
DOCUMENT NUMBER: P08000072292	
The enclosed Articles of Dissolution and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Christian Galetzka	
(Name of Contact Person)	
rise control management inc.	
(Firm/Company)	
301 Clematis Street	
(Address)	
West Palm Beach, FL 33410	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
Christian Galetzka 561 354 5530 at (
(Name of Contact Person) (Area Code) (Daytime Telephone Nu	mber)
Enclosed is a check for the following amount:	
□ \$35 Filing Fee □ \$43.75 Filing Fee & □ \$43.75 Filing Fee & □ \$52.50 Filing Fee, Certificate of Status Certified Copy (Additional copy is enclosed) □ \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)	٤

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 607.1403, 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: Perfect Floorplans Inc.		
SECOND:	The document number of the corporation (if known):		
THIRD:	The date dissolution was authorized: 05/17/2019		
	Effective date of dissolution if applicable:		
	(no more than 90 days after dissolution file to be Note: If the date inserted in this block does not meet the applicable statutory filing requirements. This date will not be listed as the document's effective date on the Department of State's records.		
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 voting 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 court appointed fiduciary, by that fiduciary)		
	Christian Galetzka		
	(Typed or printed name of person signing)		
	Incorporator		
	(Title of nerson cioning)		

Filing Fee: \$35

Notice of Corporate Dissolution

This notice is submitted by the dissolved corporation named below for resolution of payment of unknown claims against this corporation as provided in s. 607.1407, F.S.

This "Notice of Corporate Dissolution" is optional and is no	of required when filing a voluntary dissolution.
Name of Corporation: Perfect Floorplans Inc.	ج نہ
Date of dissolution will be the date the dissolution is filed w specified in the Articles of Dissolution.	
Description of information that must be included in a claim:	
- none -	
Mailing address where claims can be sent: (Claims cannot be	e sent to the Division of Corporations)
rise control management inc.	
301 Clematis Street	
West Palm Beach, FL 33410	
A claim against the above named corporation will be barred within 4 years after the filing of this notice.	unless a proceeding to enforce the claim is commenced
Christian Galetzka	// /-10.
Printed Name of the Person Filing	Signature of the Person Filing