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#### **COVER LETTER**

TO:

Registration Section Division of Corporations

SUBJECT:

# ROYALTY PAWS PET SPA, LLC

(Name of Limited Liability Company)

The enclosed Articles of Dissolution and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

## Sonia Reices

(Name of Person)

# Royalty Paws Pet Spa, LLC

(Firm/Company)

512 NW 102nd Way

(Address)

Plantation, Fl 33324

(City/State and Zip Code)

For further information concerning this matter, please call:

## Sonia Reices

(Name of Person)

<sub>#/</sub>954

723-9937

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

\$25.00 Filing Fee and Certificate of Dissolution

**MAILING ADDRESS:** 

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 \$55.00 Filing Fee, Certificate of Dissolution & Certified Copy (additional copy is enclosed)

#### STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

### ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1. The name of a limited liabil	ity company is alty Paws Pet Spa, LLC	
2. The Articles of Organization document number 16-80	n were filed on _March 25th, 2005 13302569-8	and assigned
	he dissolution if not effective on the date of fili	ing: 10/31/2013
605.0707, Florida Statutes, (	that resulted in the limited liability company's copy 605.0707 on back cover letter).  name and issues with landlord	dissolution pursuant to section
Last date of business	at location 9/30/2013	20 %
Business Code #453910, EIN 65-1245889		
5. If there are no members, enter the name and address of the person appointed to activities and affairs:  Sonia Reices		ed to wind up the companyis
don'thos and arrains.	512 NW 102nd Way	1
	Plantation, FL 33324	
6. Signature of an authorized papers to wind up the company	person or if there are no members, the signature s activities and affairs:	e of the person appointed and listed
Signature	Print	ted Name
Donukhus	Sonia Reices	

FILING FEE: \$25.00