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COVER LETTER

TO: Amendment Section
Division of Corporations
SUBJECT: Pryans Property Services
DOCUMENT NUMBER: P0400/3/106
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Byan Weaver
Myans Property Services Inc. (Firm/Company)
Palm City 7/34990
(City/State and Zip Code)
For further information concerning this matter, please call:
Ryan Weaver at (772) 219.0583 (Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$35 Filing Fee \$\begin{array}{c} \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
MAILING ADDRESS: STREET ADDRESS:

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

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:
	Kyan's Property Services Ive.
SECOND:	The document number of the corporation (if known):
THIRD:	The date dissolution was authorized: 5-1-07
	Effective date of dissolution if applicable: 5007 (no more than 90 days after dissolution file date)
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, 2000) (By a director, president or other officer - if directors or officers have not been selected, 2000) that fiduciary)
	Hyan Weaver
	(Typed or printed name of person signing) ReSIDENT
	(Title of person signing)

Filing Fee: \$35