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COVER LETTER

TO: Amendment Section

Division of Corporations	
SUBJECT: Dissolution of Roma	n Van Lines, Inc.
DOCUMENT NUMBER: P0500000	035801
The enclosed Articles of Dissolution and for	ee are submitted for filing.
Please return all correspondence concerning	g this matter to the following:
Stephanie Romano	
(Name of	Contact Person)
Roman Van Lines, Inc.	
(Firm	n/Company)
3315 Maggie Blvd. Ste. 500	ldress)
	uu coo,
Orlando, FL 32811	to and Tim Code)
(Chy/Sia	te and Zip Code)
For further information concerning this mat	ter, please call:
Stephanie Romano	at (407) 650-4920 (Area Code & Daytime Telephone Number)
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amou	nt:
\$35 Filing Fee \$\bigcup\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & S52.50 Filing Fee, Certified Copy Certificate of Status & Certified Copy (Additional copy is enclosed) (Additional copy is enclosed)
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:			
	Roman Van Lines, Inc.			
SECOND:	The document number of the corporation (if known): P05000035801			
THIRD:	The date dissolution was authorized: August 21, 2006			
	Effective date of dissolution <u>if applicable</u> : September 1, 2006 (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 intitled to vote separately on the plan to dissolve:			
	The number of votes cast for dissolution was sufficient for approval by			
	(voting group)			
	Signature:			
	Stephanie Romano			
,	(Typed or printed name of person signing)			
	President			
	(Title of person cipping)			

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 not required when filing a voluntary dissolution.

Name of Corporation: Roman Van Lines, Inc.
Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the Articles of Dissolution.
Description of information that must be included in a claim:
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)
3315 Maggie Blvd. Ste. 500
Orlando, FL 32811
A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commenced
within 4 years after the filing of this notice.
ATT ()
Stephanie Romano Stephanie Romano Formano
Printed Name of the Person Filing Signature of the Person Filing

Fee: No charge if included with Articles of Dissolution. If filed separately \$35.00