P0500059379

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ldress)	
(Ĉi	ty/State/Zip/Phone	e #)
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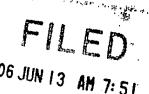


COVER LETTER

TO: Amendment Section Division of Corporations	•
•	
SUBJECT: DISOLUTION OF COMPANY	
DOCUMENT NUMBER: P05000059379	
The enclosed Articles of Dissolution and fee are subm	itted for filing.
Please return all correspondence concerning this matter	to the following:
LUIS A. RIVERO	
(Name of Contact Pers	son)
ROYALTY MED. SERVICES, INC	
(Firm/Company)	
1426 CAMELLIA CIRCLE	,
(Address)	11 (2) (1) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2
WESTON, FLORIDA 33326	
(City/State and Zip C	code)
For further information concerning this matter, please c	all:
LUIS A. RIVERO	86 / \ 247 9494
at ((86) 247-8481 Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
J	3.5 3.5
	iling Fee & : \$\sum \$52.50 Filing Fee, Copy Certificate of Status &
Certificate of Status Certified (Additional	1 2
enclosed	
MAILING ADDRESS:	,
Amendment Section	STREET ADDRESS: Amendment Section
Division of Corporations	Division of Corporations
P.O. Box 6327	Clifton Building
Tallahassee FL 32314	2661 Evecutive Center Circle

Tallahassee, FL 32301

ARTICLES OF DISSOLUTION



Pursuant to section 607.1401, Florida Statutes, this Florida profit corporation supplies the following articles of dissolution:

FIRST:	The name of the corporation as currently filed with the Florida Department of State:
	ROYALTY MED. SERVICES, INC
SECOND:	The document number of the corporation (if known): P05000059379
THIRD:	The file date of the articles of incorporation: 04/21/05
FOURTH:	(CHECK AT LEAST ONE BOX)
·	None of the corporation's shares have been issued.
	The corporation has not commenced business.
FIFTH:	No debt of the corporation remains unpaid.
SIXTH:	The net assets of the corporation remaining after winding up have been distributed to the shareholders, if shares were issued.
SEVENTH:	Adoption of Dissolution (CHECK ONE)
	A majority of the incorporators authorized the dissolution.
	A majority of the directors authorized the dissolution.
Sign	ature: (By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the bands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.)
	LUIS A. RIVERO (Typed or printed name of person signing)
	PRESIDENT/SECRETARY (Title of Person Signing)

Filing Fee: \$35