## \* Po7000084237

(Requestor's Name)  (Address)  (Address)	500199790905
(City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)	04/04/1101025025 **35.00
(Document Number)  Certified Copies Certificates of Status  Special Instructions to Filing Officer:	11 APR 15 PM
Doll River	PH 4: 31
Office Use Only	Was 1 04/19/11



## FLORIDA DEPARTMENT OF STATE Division of Corporations

April 6, 2011

JUAN C. GALIANO GALIANO TILE & MARBLE, INC. 4243 GUN CLUB RD WEST PALM BEACH, FL 33406

SUBJECT: GALIANO TILE & MARBLE, INC.

Ref. Number: P07000084237

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The current name of the entity is as referenced above. Please correct your document accordingly.

The date of adoption/authorization of this document must be a date on or prior to submitting the document to this office, and this date must be specifically stated in the document. If you wish to have a future effective date, you must include the date of adoption/authorization and the effective date. The date of adoption/authorization is the date the document was approved.

The effective date cannot be prior to or more than 90 days after the date of filing in this office.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6906.

Darlene Connell Regulatory Specialist II

Letter Number: 211A00008410

RECEIVED

11 APR 15 AM 9: "U

SECRETARY OF FLORIDA

## **COVER LETTER**

Division of Corporations	
SUBJECT: Dissolution of the Corporation.  (P07000084237).  DOCUMENT NUMBER: 26-0611374 (Tax II	
DOCUMENT NUMBER: 26-0611374 (Tax II	
The enclosed Articles of Dissolution and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Juan C Galiano (Name of Contact Person)	
(Name of Contact Person)	
Galiano Tile and Marble	
(Firm/Company)	
4243 Gun Club Rd. (Address)	
West Palm Beach Fl 33406	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
Aida Del Collado at (561) 267 8404	
(Name of Contact Person) (Area Code & Daytime Telephone Number)	
Enclosed is a check for the following amount:	
\$35 Filing Fee \$\times \$\frac{1}{2}\$43.75 Filing Fee & \$\times \$\frac{1}{2}\$43.75 Filing Fee & \$\times \$\frac{1}{2}\$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)  Certified Copy (Additional copy is enclosed)	
MAILING ADDRESS:STREET ADDRESS:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, 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:
	GALIANO TILE & MARBLE, INC.
SECOND:	The document number of the corporation (if known): D-07000 84237
THIRD:	The date dissolution was authorized:
	Effective date of dissolution if applicable: (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: Islamid
	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)
	Juan C Galiano (Typed or printed name of person signing)
	President-
	(Title of person signing)

Filing Fee: \$35