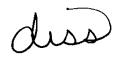
87000130682

(Reque	stor's Name)			
(Addre	ss)			
	,			
(*) !				
(Addre	SS)			
(City/State/Zip/Phone #)				
PICK-UP	WAIT	MAIL		
(D)				
(Busine	ess Entity Name)		
(Docur	nent Number)			
Certified Copies	Certificates of	f Status		
 				
Special Instructions to Filir	ng Officer:			
.				





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04/21/08--01053--018 **35.00

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40R 6/2/08

X00789, 045227 00671



April 29, 2008

Elaine Sawyers Reality Cleaners Inc. 6058 SW 19 Ct. North Lauderdale, FL 33068

SUBJECT: REALITY CLEANERS INC.

Ref. Number: P07000130682

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

Articles of Revocation of Dissolution cannot be filed for an active Florida corporation. If you are trying to voluntarily dissolve the corporation enclosed is information on filing Articles of Dissolution.

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) 245-6907.

Letter Number: 108A00026229

Annette Ramsey Regulatory Specialist II

COVER LETTER

TO: Amendment Section Division of Corporations					
SUBJECT: REALITY CA	EANERS INC.				
DOCUMENT NUMBER: P07000130682					
The enclosed Articles of Dissolution	The enclosed Articles of Dissolution and fee are submitted for filing.				
Please return all correspondence con-	cerning this matter to the following:				
	·				
ELAINE SAM	V YERS				
ELAINE SAWYERS (Name of Contact Person) REALITY CREAMERS INC.					
KEALITY CA	CEANERS YNC				
	(Firm/Company)				
6058 SW. 19th Co.	urt,				
	(Address)				
NOOTH LAUDEDWALE	Eity/State and Zip Code)				
(C	City/State and Zip Code)				
For further information concerning t					
For further information concerning to	ins matter, prease can.				
Fig. 15 Samue CC	954 652 - 87.28				
(Name of Contact Person)	at (954-) 653 - 87.38 (Area Code & Daytime Telephone Number)				
Enclosed is a check for the following					
☐\$35 Filing Fee ☐\$43.75 Filing Fee Certificate of S					
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

FILED

Pursuant to : of dissolutio	section 607.1403, Florion:	da Statutes, this Flor	ida profit corp	oration subtlets 36 following articles SEGRETARY OF STATE Florida Department of States
FIRST:	_	poration as currently	_	Florida Department of State:
SECOND:		1		P0700013068>
THIRD:	The date dissolution	was authorized:	4/20/20	008
	Effective date of dis	solution <u>if applicable</u>	(no more	than 90 days after dissolution file date)
FOURTH:	Adoption of Dissolu	tion (CHECK ONE)	ı	
,	Dissolution was was sufficient fo		reholders. The	number of votes cast for dissolution
	Dissolution was	approved by the sha	reholders thro	ugh voting groups.
	, ,	nent must be separat n the plan to dissolv		or each voting group entitled
	The number of votes	cast for dissolution	was sufficient	for approval by
		(voting group)	
P		esident or other officer - tr	directors or officer	s have not been selected, by ourt appointed fiduciary, by
	ELAINE	SAWYERS		
	Preside	yped or printed name of pe (Title of person signing		

Filing Fee: \$35