P3900012417

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COVER LETTER

TO: Amendment Section

Division of Corporations	
SUBJECT: Acticles of Dis	solution
DOCUMENT NUMBER: P0900001Z	417
The enclosed Articles of Dissolution and fee are su	bmitted for filing.
Please return all correspondence concerning this ma	atter to the following:
Rolando C (Name of Contact)	ACUAS Person)
Royal Furnic (Firm/Compa	ture Inc
1802 E. Human (Address)	shrey St
Tampa, Fl (Oity/State and Z	33604 ip Code)
For further information concerning this matter, plea	se call:
Rolando Cuevas at (Name of Contact Person)	(813) 325-618/ (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
Certificate of Status Certif	75 Filing Fee & 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

Pursuant to section 607.1401, 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 Sta	ıte:
	Boyal Furniture, Inc.	
SECOND:	The document number of the corporation (if known): P09000174(7	Ī
THIRD:	The file date of the articles of incorporation: $02/09/2009$	
FOURTH:	(CHECK AT LEAST ONE BOX)	
	None of the corporation's shares have been issued.	
	The corporation has not commenced business.	2
FIFTH:	No debt of the corporation remains unpaid.	OIO JAN
SIXTH:	The net assets of the corporation remaining after winding up have been distributed to the shareholders, if shares were issued.	-6 -6
SEVENTH:	: Adoption of Dissolution (CHECK ONE)	PHIZ: I2
	A majority of the incorporators authorized the dissolution.	7
	A majority of the directors authorized the dissolution.	
Sign	(By a director, president or other officer - If directors or officers have not been selected, by an incorpora in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.)	ator - if
	ROLANDO CUEVAS GA (Typed or printed name of person signing)	
	DWNER-PRESIDENT. (Title of Person Signing)	

Filing Fee: \$35