

P99000099844

OFFICE USE ONLY (Document #)

EXPRESS CORPORATE FILING SERVICE, INC

(Requestor's Name)

1000 PONCE DE LEON BLVD. STE: 112

(Address)

CORAL GABLES, FL 33134 (305)444-4994

(City, State, Zip)

(Phone #)

OFFICE USE ONLY

DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

00 MAY 12 PM 12:47

FILED

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. Royal Touch Family Restaurant, Inc.
(Corporation Name) (Document #) P99000099844

2. _____
(Corporation Name) (Document #)

3. _____
(Corporation Name) (Document #)

4. _____
(Corporation Name) (Document #)

☐ Walk in

☒ Pick up time

☐ Certified Copy

☐ Mail out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

00 MAY 12 AM 10:26

RECEIVED

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input checked="" type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

300003250543--7

-05/12/00--01039--022

*****35.00 *****35.00

Diss
5-12-00
BAS

Examiner's Initials

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 is: Royal Touch Family Restaurant,
Inc. 99000099844

SECOND: The date dissolution was authorized: February 2, 2000

THIRD: 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 vote of 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)

Signed this 11 day of May, 2000.

Signature

Jacqueline Holloway
(By the Chairman or Vice Chairman of the Board, President, or other officer)

Jacqueline Holloway
(Typed or printed name)

Vice - President
(Title)

CLERK OF STATE
TALLAHASSEE, FLORIDA

00 MAY 12 PM 12:47

FILED