

L09000036305

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H10000201467 3))



H100002014673ABCY

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations
Fax Number : (850) 617-6383

From: Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850) 222-1092
Fax Number : (850) 878-5368

L. SELLERS
SEP 13 2010
EXAMINER

**LLC DISSOLUTION OR WITHDRAWAL
ALLY INSURANCE COMPANY ONLINE, LLC**

| | |
|-----------------------|---------|
| Certificate of Status | 0 |
| Certified Copy | 0 |
| Page Count | 02 |
| Estimated Charge | \$25.00 |

RECEIVED

10 SEP 10 PM 3:59

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Electronic Filing Menu Corporate Filing Menu Help

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

10 SEP 10 AM 9:10

FILED

ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY

1. The name of a limited liability company is

Ally Insurance Company Online, LLC

2. The Articles of Organization were filed on 04/15/2009

and assigned document number

L09000036305

3. The date the dissolution was approved: 09/13/2010

4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 608.441, Florida Statutes, (copy 608.441 on back cover letter),

Written consent of member

5. CHECK ONE:

All debts, obligations and liabilities of the limited liability company have been paid or discharged.

-OR-

Adequate provision has been made for the debts, obligations and liabilities pursuant to s. 608.4421.

6. All remaining property and assets have been distributed among its members in accordance with their respective rights and interests.

7. CHECK ONE:

There are no suits pending against the company in any court.

-OR-

Adequate provision has been made for the satisfaction of any judgment, order or decree which may be entered against it in any pending suit.

Signatures of the members having the same percentage of membership interests necessary to approve the dissolution:

Signature

Printed Name

C. L. Quenneville

C. L. Quenneville, Secretary-Motor Insurance
Corporation, Member

FILING FEE: \$25.00

FLS-00127000-07 8/14/08

FILED
10 SEP 10 AM 9:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA