## P94000012188

City/State/Zip Phone #

Office Use Only

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

1	9000003344	1297
(Corporation Name)	(Document #) = -08/02/00 *****35.00	01089na i
2. (Corporation Name)	(Document #)	<u>-</u>
(Corporation Name)	(Document #)	
4. (Corporation Name)	(Document #)	_
□ Walk in □ Pick up time   □ Mail out □ Will wait	Photocopy Certificate of Sta	tus
NEW FILINGS	<u>AMENDMENTS</u>	
Profit Not for Profit Limited Liability Domestication Other	Amendment  Resignation of R.A., Officer/Director S  Change of Registered Agent  Dissolution/Withdrawal  Merger	
OTHER FILINGS  Annual Report Fictitious Name	REGISTRATION/QUALIFICATION	

Examiner's Initials 8/8

## 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: A - Able & Willing
Aut	à Insurance - Incorporated
SECOND:	The date dissolution was authorized: 2/14/2000
THIRD:	Adoption of Dissolution (CHECK ONE)
Diss was s	olution was approved by the shareholders. The number of votes cast for dissolution sufficient for approval.
☐ Diss	olution was approved by vote of the shareholders through voting groups.
	ne following statement must be separately provided for each voting group titled to vote separately on the plan to dissolve:
The 1	number of votes cast for dissolution was sufficient for approval by
Signe	ed this 29 day of July , 2000 30 30 30 30 30 30 30 30 30 30 30 30
Signature	(By the Chairman or Vice Chairman of the Board, President, or other officer)
	Tâmes Onohara (Typed or printed name)
	President
	(Title)