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### **COVER LETTER** .

TO: Regi	istration Section ision of Corporations
SUBJECT:	AJAX Insurance Group LLC
	(Name of Limited Liability Company)
The enclosed	Articles of Dissolution and fee(s) are submitted for filing.
	all correspondence concerning this matter to the following:
	1.
	Walter Liu
	(Name of Person)
	(Firm/Company)
	8692 Hunters Creek Dr South
	(Address)
	Jacksonville, FL 32256
	(City/State and Zip Code)
Eas further in	
ror turther in	formation concerning this matter, please call:
Wa	alter Liu at ( 954 ) 562-7662
	(Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a cl	heck for the following amount:
\$25.00 Filing	g Fee  Certificate of Status   Certified Copy (additional copy is enclosed)  Certified Copy (additional copy is enclosed)

## **MAILING ADDRESS:**

=:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

### STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

# ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

FILED

2010 OCT 19 AM 10: 1.0

1. The name of a limited liability company is

AJAX Insurance Group LLC

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and assigned document number
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ssolution pursuant to section
have been paid or discharged.  pilities pursuant to s. 608.4421.
n accordance with their respective
ent, order or decree which may be
cessary to approve the dissolution:
Printed Name
iu

FILING FEE: \$25.00