

184944

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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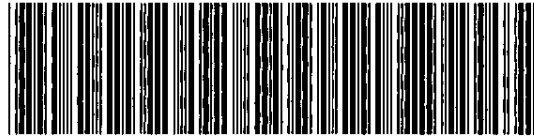
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

J. Shivers JAN 08 2009

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** GREAT ATLANTIC LIFE INSURANCE COMPANY

**DOCUMENT NUMBER:** 184944

The enclosed **Articles of Dissolution** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

FRANK L. MCPHILIPS, ESQ.  
(Name of Contact Person)  
GADSTEIN, TANEN & TRENCH, P.A.  
(Firm/Company)  
2 SOUTH BISCAYNE BLVD., SUITE 3700  
(Address)  
MIAMI, FL 33131  
(City/State and Zip Code)

For further information concerning this matter, please call:

FRANK L. MCPHILIPS at ( 305 ) 374- 3250  
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☐ \$35 Filing Fee    ☐ \$43.75 Filing Fee & Certificate of Status    ☐ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)    ☒ \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)

**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

2008 DEC 30 AM 9:11  
SECRETARY OF  
TALLAHASSEE, FL

**ARTICLES OF DISSOLUTION  
OF  
GREAT ATLANTIC LIFE INSURANCE COMPANY**

Great Atlantic Life Insurance Company, by its President, for purposes of complying with Florida Statutes §607.1403 relating to Articles of Dissolution, does hereby execute the following Articles of Dissolution:

1. The name of the corporation as currently filed with the Florida Department of State is Great Atlantic Life Insurance Company.

2. The document number of the corporation is 184944.

3. The dissolution was authorized on December 15, 2008.

The Effective date of dissolution is December 31<sup>\*</sup>, 2008.

4. 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 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)

Signature:

  
(By a director, president or other officer)

Patricia B. Dean  
(Type or printed name of person signing)

President  
(Title of person signing)

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