

F02 871

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TALLAHASSEE FL 32301

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C. CARROTHERS

M.S. MARLIN, P.A.
ATTORNEYS AT LAW

SUITE 304
250 CATALONIA AVENUE
CORAL GABLES, FLORIDA 33134
AREA CODE 305, TELEPHONE 442-8228
FAX 305-445-9880

GARY R MARLIN

SENT VIA FEDEX

November 24, 2015

AMENDMENT SECTION
DIVISION OF CORPORATIONS
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

RE: T. LEONARD INSURANCE AGENCY, INC.

DOCUMENT NUMBER: F02871

To whom it may concern:

Enclosed please find the following pertaining to the above corporation:

1. Original Cover Letter.
2. Original executed Articles of Dissolution. PLEASE NOTE THAT THE EFFECTIVE DATE OF THE DISSOLUTION IS DECEMBER 31, 2015.
3. My trust check, made payable to the Florida Department of State in the amount of \$43.75, representing the filing fee and Certificate of Status.

Thank you.

Yours truly,



GARY R MARLIN

Encls.

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: T. LEONARD INSURANCE AGENCY, INC.

DOCUMENT NUMBER: F02871

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

Please return all correspondence concerning this matter to the following:

TAL LEONARD

(Name of Contact Person)

T. LEONARD INSURANCE AGENCY, INC.

(Firm/Company)

9861 MAINSAIL COURT

(Address)

FORT MYERS, FL 33901-3146

(City/State and Zip Code)

For further information concerning this matter, please call:

Gary R Marlin, Esq.

at (305-442-8228

(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

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 as currently filed with the Florida Department of State:
T. LEONARD INSURANCE AGENCY, INC.

SECOND: The document number of the corporation (if known): F02871

THIRD: The date dissolution was authorized: November 13, 2015

Effective date of dissolution if applicable: December 31, 2015

(no more than 90 days after dissolution file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

FOURTH: 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 - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary)

TAL LEONARD

(Typed or printed name of person signing)

President, Secretary, and Treasurer

(Title of person signing)

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