

F51856

(Requestor's Name)

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☐ PICK-UP

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(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

12/20/10--01025--017 **35.00

diss
C.COULLETTE

JAN 28 2011

EXAMINER

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: _____

DOCUMENT NUMBER: _____

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

Please return all correspondence concerning this matter to the following:

Douglas H. Donziger
(Name of Contact Person)

Doug Donziger Agency, Inc.
(Firm/Company)

5461 N. FEDERAL Highway
(Address)

FORT LAUDERDALE FL 33308
(City/State and Zip Code)

For further information concerning this matter, please call:

Doug Donziger at (954) 781-8107
(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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 11, 2011

DOUGLAS DANZINGER
~~5401 N. FEDERAL HWY~~
~~PT LAUDERDALE, FL 33308~~

1600 S. OCEAN Blvd # 902
Pompano, FL 33062

SUBJECT: DOUG DANZIGER INSURANCE AGENCY, INC.
Ref. Number: F51856

We have received your document for DOUG DANZIGER INSURANCE AGENCY, INC. and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The current name of the entity is as referenced above. Please correct your document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6903.

Cheryl Coulliette
Regulatory Specialist II

Letter Number: 611A00000867

RECEIVED
JAN 27 AM 11:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:
DOUG DANZIGER INSURANCE AGENCY, INC.

SECOND: The document number of the corporation (if known): F51856

THIRD: The date dissolution was authorized: 12/01/2010

Effective date of dissolution if applicable: 12/31/2010
(no more than 90 days after dissolution file date)

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

Shareholders
(voting group)

Signature: [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)

DOUGLAS H. DANZIGER
(Typed or printed name of person signing)

[Signature]
(Title of person signing)

Filing Fee: \$35

FILED
11 JAN 28 AM 11:37
SECRETARY OF STATE
TALLAHASSEE, FLORIDA