K 65510

(Requestor's Name)		
(Address)		
(Address)		
(Ci	ty/State/Zip/Phone #)	
PICK-UP		
(Bu	isiness Entity Name)	
(Do	ocument Number)	<u>^</u>
Certified Copies	_ Certificates of	Status
Special Instructions to Filing Officer:		
Office Use Only		



06/09/03--01003--003 **52.50

FILED 03 JUN -9 PN 3: 37 TALLANASSEE, FLORIDA

An imal leli



June 5, 2003

Florida Department of State **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

RE: Summit Claims Management, Inc., a Florida Corporation

Dear Sir:

Enclosed is the original and a copy of the executed Articles of Dissolution regarding the referenced Florida corporation. Also enclosed is a check for \$52.50 to cover the filing fee of \$35.00; your fee for certifying a copy of the Articles of Dissolution in the amount of \$8.75; and your fee for providing a certificate of status in the amount of \$8.75.

Please return the certified copy and the status certificate to me at the address referenced below.

Thank you for your assistance in this matter.

Very truly yours,

5. Ľ Thomas L. Clarke, Jr.

TLCJr:lr

Enclosures

ARTICLES OF DISSOLUTION

Pursuant to Section 607.1403, Florida Statutes, the following Articles of Dissolution are submitted:

1. The name of the Florida corporation to be dissolved is Summit Claims Management, Inc.

2. The sole shareholder of Summit Claims Management, Inc., namely, Summit Consulting, Inc., by unanimous vote of its Board of Directors, authorized the dissolution of its subsidiary, effective upon the filing of these Articles of Dissolution.

3. The date the Board of Directors of Summit Consulting, Inc., voted to authorize the dissolution of its subsidiary, Summit Claims Management, Inc., was June 1, 2003.

4. The number of votes in favor of dissolution was sufficient for approval.

Signed this <u>5TH</u> day of June, 2003.

Ricky T. Hodges, President Summit Consulting, Inc.

COST UN -9 PH 3 37