

05/24/2005 15:09

8508 85926

CT CORPORATION SYSTM

PAGE 01/02

Division of Corporations

Page 1 of 1

K94016

Florida Department of State  
Division of Corporations  
Public Access System

Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet.** Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H05000130917 3)))

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.** Doing so will generate another cover sheet.

To:

Division of Corporations  
Fax Number : (850) 205-0380

From:

Account Name : C T CORPORATION SYSTEM  
Account Number : FCA000000023  
Phone : (850) 222-1092  
Fax Number : (850) 878-5926

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

05 MAY 24 PM 4: 29

FILED

DISSOLUTION

WITTNER INSURANCE NETWORK, INC.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

Attn: Tolson

RECEIVED  
05 MAY 24 PM 4: 14  
DIVISION OF CORPORATIONS

Electronic Filing Menu

Corporate Filing

Public Access Help

**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:

Witmer Insurance Network, Inc.

**SECOND:** The document number of the corporation (if known): K94016

**THIRD:** The date dissolution was authorized: April 29, 2005

Effective date of dissolution if applicable: \_\_\_\_\_

(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 of 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)

Signed this 17<sup>th</sup> day of May, 2005

Signature: W. Lawrence

(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)

Drew Lawrence

(Typed or printed name of person signing)

Vice President

(Title of person signing)

**Filing Fee: \$35**

05 MAY 24 PM 4: -  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA