Requester's Name 1344 S.E. 14th Stree Address Ocalas Ft 34471 City/State/Zip Phone #	DDD ref 10/18	73/9
CORPORATION NAME(S) & DOCUM		office Use Only
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☐ Walk in ☐ Pick up time	- · · · · · · · · · · · · · · · · · · ·	Certified Copy
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NEW FILINGS	AMENDMENTS	F OCT RETAR AHASS
Profit	=::::::::::::::::::::::::::::::::::::::	TARY OF STATE ASSEE, FLORIDA Cod Agent Agent
Not for Profit	Resignation of R.A.	officer/Director OFF STATE Agent State Sta
Limited Liability Domestication	Change of Registere Dissolution/Withdra	ed Agent $\frac{2}{2}$
Other	Merger	awai
OTHER FILINGS	REGISTRATION/QUA	ALIFICATION
Annual Report	☐ Foreign	••
Fictitious Name	Limited Partnership Reinstatement	
	Trademark	
	☐ Other	
CR2E031(7/97)		Examiner's Initials

ARTICLES OF DISSOLUTION FOR A FLORIDA LIMITED LIABILITY COMPANY

1. The name of the limited liability company is	GLOBI	ac TECH	1010C-Y	ASSURAN	ice LLC
 The effective date of the limited liability com A description of the occurrence that resulted 0section 608.441, Florida Statutes, (copy of 6) 	in the limited	liability comp	any's disso	10, 20	<u> </u>
Agreement of the nem			_	Compa	mry .
			Transition of the second		
 4. CHECK ONE: All debts, obligations and liabilities of the liaborate of	lebts, obligation distributed and any in any countries artisfaction of a	ns and liabiliti nong its memb urt. nny judgment,	es pursuant pers in acco	rdance with SECRECTARY Cree,	their 01 00 00 FILE
Signatures of the members having the same pedissolution: Signature		embership inte r Printed name	÷	sary to applic STATE LORIDA	veille U
Larfred Marey Co	Lant	Ford T. S	laugh t	- - -	

Filing Fee: \$25.00