

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To: Division of Corporations  
Fax Number : (850) 617-6383

From: Account Name : FILINGS, INC.  
Account Number : 072720000101  
Phone : (850) 385-6735  
Fax Number : (954) 641-4192

**LLC DISSOLUTION OR WITHDRAWAL  
GOVERNORS TITLE SERVICES, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

15 APR 17 AM 10:00

BUREAU OF CORPORATIONS  
INFORMATION SERVICES

STATE OF FLORIDA  
TALLAHASSEE, FLORIDA

15 APR 17 PM 12:20

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Electronic Filing Menu

Corporate Filing Menu

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April 17, 2015

FLORIDA DEPARTMENT OF STATE

Division of Corporations

GOVERNORS TITLE SERVICES, LLC  
800 S.E. 3RD AVENUE  
SUITE 300  
FORT LAUDERDALE, FL 33316

SUBJECT: GOVERNORS TITLE SERVICES, LLC  
REF: L03000033911

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refile the complete document, including the electronic filing cover sheet.

The Articles of Organization were filed on September 11, 2003, please correct your document.

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) 245-6051.

Teresa Brown  
Regulatory Specialist II

FAX Aud. #: H15000092907  
Letter Number: 115A00007676

15 APR 17 AM 10:00

BUREAU OF COMMERCIAL  
INFORMATION SERVICES

P.O. BOX 6327 - Tallahassee, Florida 32314

H15000092907

ARTICLES OF DISSOLUTION  
FOR  
A LIMITED LIABILITY COMPANY

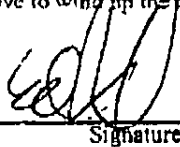
FILED  
15 APR 17 PM 12:20  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

1. The name of a limited liability company is  
Governors Title Services, LLC
2. The Articles of Organization were filed on 9/11/2003 and assigned  
document number L03000033911
3. The delayed effective date the dissolution if not effective on the date of filing;  
(effective date cannot be prior to or more than 90 days later than date document is received for filing)
4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section  
605.0707, Florida Statutes, (copy 605.0707 on back cover letter).

CONSENT OF ALL MEMBERS

5. If there are no members, enter the name and address of the person appointed to wind up the company's  
activities and affairs:  
Edward S. Robbins  
Edward S. Robbins, P.A.  
800 SE Third Avenue #300  
Fort Lauderdale, FL 33316

6. Signature of an authorized person or if there are no members, the signature of the person appointed and  
listed above to wind up the company's activities and affairs:

  
Signature

EDWARD S. ROBBINS  
Printed Name

FILING FEE: \$25.00

H15000092907