## LB400065675

(Requestor's Name)	
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DEFARITION OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

RECEIVED

B. KOHR

MAR 2 9 2011

**EXAMINER** 

11 MAR 28 PH 3: 58

SECRETARY OF STATE



ACCOUNT NO. : 12000000195 REFERENCE : 7379988 AUTHORIZATION COST LIMIT ORDER DATE: March 28, 2011 ORDER TIME : 2:51 PM ORDER NO. : 724299-005 CUSTOMER NO: 7379988 DOMESTIC FILINGS NAME: CONSUMER SELECT INSURANCE, LLC XX ARTICLES OF DISSOLUTION PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_\_ CERTIFIED COPY
\_\_ PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Troy Todd - EXT# 2940

EXAMINER'S INITIALS:



March 29, 2011

TROY TODD CSC TALLAHASSEE, FL

SUBJECT: CONSUMER SELECT INSURANCE, LLC

Ref. Number: L04000065675

RESUBNIT

Please give original submission date as file date.

We have received your document for CONSUMER SELECT INSURANCE, LLC and the authorization to debit your account in the amount of \$25.00. However, the document has not been filed and is being returned for the following:

There must be a "description of the occurrence that resulted in the dissolution" in Item 4. This description can be VERY brief.

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) 245-6914.

Buck Kohr Regulatory Specialist II

Letter Number: 711A00007502

RECEIVED

11 MAR 29 PM 4: 09

BUSION OF CORPORATION

## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

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to approve the dissolution:
to approve the dissolution.
ted Name
gs, LLC, its sole membe
**
Robinson, Manager
5-5-4

FILING FEE: \$25.00