



L07 000086729

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

September 3, 2009

REGIONAL INSURANCE LLC  
PO BOX 1077  
GRETN, FL 32332

200160334642

SUBJECT: REGIONAL INSURANCE LLC

Debit Memo #: 96578-6

Document #: L07000086729

Due to your failure to respond to our letter advising you of your returned check and giving you 60 days notice of our intent to dissolve or revoke the above limited liability company, this limited liability company is now administratively dissolved or revoked.

A Certificate of Dissolution or Revocation is enclosed.

# State of Florida



## Department of State

### CERTIFICATE OF ADMINISTRATIVE DISSOLUTION

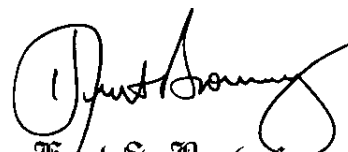
The requirements of section, 608.4481, Florida Statutes, requiring 60 days notice of our proposed Administrative Dissolution of a limited liability company, have been met for REGIONAL INSURANCE LLC, Florida limited liability company. The limited liability company is hereby dissolved as of September 3, 2009 for failure to file the limited liability company annual report/uniform business report, as required by law.

The document number of this limited liability company is L07000086729.

Given under my hand and the  
Great Seal of the State of Florida  
at Tallahassee, the Capitol, this the  
Third day of September, 2009



CR2EO22 (01-07)

  
Kurt S. Browning  
Secretary of State



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

June 16, 2009

REGIONAL INSURANCE LLC  
P.O BOX 1077  
GRETNA, FL 32332

SUBJECT: REGIONAL INSURANCE LLC  
Ref. Number: L07000086729

Debit Memo #: 96578-G

This is to inform you that check #0996 in the amount of \$138.75 submitted with the annual report/uniform business report for REGIONAL INSURANCE LLC has been returned by your bank because of NON-SUFFICIENT FUNDS.

We request you remit a cashier's check or money order, referencing the above named debit memo number, in the amount of \$153.75 made payable to the Department of State to cover the unpaid fees and service charge.

Sections 608.4481 and 608.513, Florida Statutes, requires us to give at least 60 days notice of our intent to administratively dissolve a Florida limited liability company or revoke the authority to transact business of a foreign limited liability company for failure to file the annual report/uniform business report and pay the filing fee. This will serve as your notice that if payment of \$153.75 is not received within the 60 day period, your limited liability company will be administratively dissolved or revoked and a reinstatement fee of an additional \$100 will be imposed.

Please send your response to:

Division of Corporations  
Attn: Catherine F Chin  
P.O. Box 6327  
Tallahassee, FL 32314

If you have any questions concerning the filing of your document, please call (850) 245-6057.

Catherine F Chin  
Senior Clerk

Letter Number: 809A00020428