

LO80000016838

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

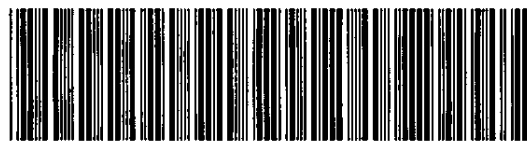
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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03/18/14--01019--024 **25.00

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2014 MAR 18 PM 2:05

CLERK OF STATE
TALLAHASSEE, FLORIDA

MAR 19 2014

D. BRUCE

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: First Florida Title Agency, LLC

(Name of Limited Liability Company)

The enclosed Articles of Dissolution and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Shannon Ortega

(Name of Person)

(Firm/Company)

289 Launenburg Lane

(Address)

Ocoee, Florida 34761

(City/State and Zip Code)

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TALLAHASSEE FLORIDA

For further information concerning this matter, please call:

Shannon Ortega

(Name of Person)

407

250-6930

at

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

✓ \$25.00 Filing Fee and Certificate of Dissolution

— \$55.00 Filing Fee, Certificate of Dissolution &
Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1. The name of a limited liability company is
First Florida Title Agency, LLC
2. The Articles of Organization were filed on 2/15/2008 and assigned
document number L08000016838
3. The delayed effective date the dissolution if not effective on the date of filing: 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).
The company lost it's underwriter. The company does not qualify to obtain a new
underwriter. The company can not conduct business without an underwriter.
5. If there are no members, enter the name and address of the person appointed to wind up the company's
activities and affairs: Shannon Ortega
289 Launenburg Lane
Ocoee, Florida 34761
6. Signature of an authorized person or if there are no members, the signature of the person appointed as
listed above to wind up the company's activities and affairs:

Shannon Ortega
Signature

Shannon Ortega
Printed Name

FILING FEE: \$25.00

FILED
2014 MAR 18 PM 2:05
CLERK OF DISTRICT COURT
SOUTHERN DISTRICT OF IOWA