L08000071364

(Re	equestor's Name)	
(Ac	ddress)	
·	•	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone #)
PICK-UP	☐ WAIT	MAIL
_	_	_
(Bı	usiness Entity Name))
(Do	ocument Number)	
Certified Copies	Codificatos of	Status
Certified Copies	_ Certificates of	Status
Special Instructions to	Filing Officer:	
·	-	
		-
	`	
mosen -	tocal	
-		





400418528114

12/27/23--01026--003 **25.00

11/06/26--01047--011 **52.50



DEC 2 2 2023

D CUSHING

COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: Surety Agency Holding Company, LLC			
Name of Limited Liability Company			
Dear Sir or Madam:			
The enclosed Statement of Termination and fee(s) are submitted for filing.			
Please return all correspondence concerning this matter to the following:			
Michael J. Holtz, Esq.			
Name of Person			
Dentons Bingham Greenebaum LLP Firm/Company			
Fittib Company			
101 S Fifth Street, 3500 PNC Tower Address			
Louisville, KY 40202-3197 City/State and Zip Code			
michael.holtz@dentons.com		2027	
E-mail address: (to be used for future annual report notification)	#. ·	2023 DEC	٠,٠
For further information concerning this matter, please call:	42)	20	- 4
	,	I.	
Michael J. Holtz, Esq. at (502) 587-3648 Name of Person Area Code Daytime Telephone Number	•	ڣ	سه
Transcott Mea Code Daytime Telephone Pulling	111	$\stackrel{\circ}{\circ}$	

Mailing Address:

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

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

CR2E141 (2/14)

Michael J. Holtz

Partner

Direct (502) 587-3648

October 23, 2023

VIA UPS OVERNIGHT DELIVERY

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

Re: Articles of Dissolution of Surety Agency Holding Company, LLC

Dear Sir or Madam:

Please be advised that this firm represents Surety Agency Holding Company, LLC, a Florida limited liability company (the "Company"). On behalf of the Company, and pursuant to the provisions of F.S.A. § 605.0701, enclosed please find an original executed Articles of Dissolution ("Articles") for the Company. Please return a file-stamped copy of the Articles to my attention in the self-addressed, postage prepaid envelope provided herein, and direct any questions to:

MICHAEL J. HOLTZ, ESQ.
DENTONS BINGHAM GREENEBAUM LLP
101 SOUTH FIFTH STREET
LOUISVILLE, KENTUCKY 40202-3197
(502) 587-3648

Please also find enclosed a check payable to the Florida Department of State in the amount of \$25.00 for the filing fee associated with the Articles.

Very truly yours,

Michael J. Holtz, Esq.

Enclosures



December 5, 2023

MICHAEL J HOLTZ, ESQ. DENTONS BINGHAM GREENEBAUM LLP 101 S FIFTH STREET LOUISVILLE, KY 40202-3197

SUBJECT: SURETY AGENCY HOLDING COMPANY, LLC

Ref. Number: L08000071364

We have received your document for SURETY AGENCY HOLDING COMPANY. LLC and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a Limited Partnership, but your entity is a Limited Liability Company. Please complete and return the enclosed blank form(s).

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) 245-6050.

Letter Number: 523A00027670

Diane Cushing Operations Manager A

www.sunbiz.org

STATEMENT OF TERMINATION

Pursuant to section 605.0709(7), Florida Statutes, I hereby submit the following Statement of Term	inatio	n:
FIRST: The name of the limited liability company is: Surety Agency Holding Company, LLC		
SECOND: The Florida Document number of the limited liability company is: L08000071364		
THIRD: The date of filing of the initial articles of organization is: <u>July 24²⁰⁰⁸</u>		
FOURTH: The date of filing of the dissolution is: November 6, 2023	_·	
FIFTH: This limited liability company has completed winding up its activities and affairs and has that it will file a statement of termination.	detern	nined
Signature of Authorized Representative Typed or printed name of signature	2023 DEC 20 AM 9:	
Filing Fee: \$25.00	20	

Certified Copy: \$30.00 (optional)

CR2E141 (2/14)