L09000004517

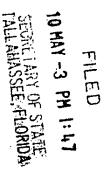
(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
hard the second				

Office Use Only



400179933834

05/03/10--01032--016 **25.00



COVER LETTER

TO: Registration Section Division of Corporatio	าร		
SUBJECT: JACOBSO	N INSURANC	E ADVISORS, LLC	
	(Name of L	imited Liability Company)	
The enclosed Articles of Dissolu	ution and fee(s) are sub	omitted for filing.	
Please return all correspondence	concerning this matte	er to the following:	
John A. J	acobson		
· · ·	((Name of Person)	
JACOBS	ON INSURAN	CE ADVISORS, LLC	
		(Firm/Company)	
5100 Tov	n Center Circ		
	=:	(Address)	
Boca Rat	on, FL 33486	y/State and Zip Code)	
	(0.1.)	y State and Esp Code)	
For further information concern	ng this matter, please	call:	
John A. Jacobson		at (561) 573-1894	
(Nam	e of Person)	(Area Code & Daytim	e Telephone Number)
Enclosed is a check for the following	g amount:		
\$25.00 Filing Fee	30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed
	ADDRESS:		URIER ADDRESS:
Registration Section Division of Corporations		Registration Section Division of Corporations	
P.O. Box 6327		Clifton Building 2661 Executive Center Circle	
Tallahassee, FL 32314		2001 Executive Center Circle	

Tallahassee, FL 32301

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

FILED:

10 MAY -3 PM 1: 47

SECRETARY OF STATES

1. The name of a limited liability company is JACOBSON INSURANCE ADVISORS,	LLC TALL AHASSEE, FLORIDA
2. The Articles of Organization were filed on L09000004517	, 2009 and assigned document number
3. The date the dissolution was approved: April 12, 20	010
4. A description of occurrence that resulted in the limited 1 608.441, Florida Statutes, (copy 608.441 on back cover No members remain to carry on activity	iability company's dissolution pursuant to section letter).
5. CHECK ONE:	
All debts, obligations and liabilities of the limit	ed liability company have been paid or discharged.
	s, obligations and liabilities pursuant to s. 608.4421.
6. All remaining property and assets have been distributed rights and interests.	among its members in accordance with their respective
7. CHECK ONE:	
There are no suits pending against the company	in any court.
-OR- Adequate provision has been made for the satis entered against it in any pending suit.	faction of any judgment, order or decree which may be
signatures of the members having the same percentage of men	mbership interests necessary to approve the dissolution:
Signature	Printed Name
All feel	John A. Jacobson
	:
	

FILING FEE: \$25.00