LU900059640				
(Requestor's Name) (Address) (Address)	800149909828			
(City/State/Zıp/Phone #)	FILED 09 JUL 27 PM 2: 45 SECRETARY OF STATE TALLAHASSEE, FLORU A			
Certified Copies Certificates of Status	RECEIVED DEPARTMENT OF STATE INVISION OF CORPORATIONS 2009 JUL 27 AM ID: 49 INVISION OF CORPORATIONS SUFFICIENCY OF FILING SUFFICIENCY OF FILING			
Office Use Only	B. KOHR JUL 2 7 2009 EXAMINER			



	ACCOUNT NO.	: I2000000 0 195	A U. 20
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	COST LIMIT	: 25.00	in the second
	ORDER DATE : July 21, 2009		
	ORDER TIME : 4:23 PM		A.
	ORDER NO. : 072532-020		
	CUSTOMER NO: 4301225		
•	DOMESTIC F	<u>ILINGS</u>	ns fr-yp-
	NAME: SERVICE FIRST SOLUTIONS, LLO		NOA ST
	XX ARTICLES OF DISSOLUTION		

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Kimberly Moret - EXT# 2949

EXAMINER'S INITIALS:

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1. The name of a limited liability company is Service First Insurance Solutions, LLC

2. The Articles of Organization were filed on June 19, 2009 L09000059640

3. The date the dissolution was approved: July 23, 2009

4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 608.441, Florida Statutes, (copy 608.441 on back cover letter). Unintentionally filed

5. CHECK ONE:

All debts, obligations and liabilities of the limited liability company have been paid or discharged.

Adequate provision has been made for the debts, obligations and liabilities pursuant to s. 608.4421.

- 6. All remaining property and assets have been distributed among its members in accordance with their respective rights and interests.
- 7. CHECK ONE:

There are no suits pending against the company in any court.

OR-Adequate provision has been made for the satisfaction of any judgment, order or decree which may be entered against it in any pending suit.

Signatures of the members having the same percentage of membership interests necessary to approve the dissolution:

Signature

Printed Name

Robert J. Smith

_ and assigned document number

OJUL 27 PH 2: 15

FILING FEE: \$25.00