Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H150002603623)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850) 617-6383

From:

Account Name : BARNETT, BOLT, KIRKWOOD, LONG & KOCHE, P.A.

Account Number : 072731001155 Phone

: (813)253-2020

Fax Number

: (813)251-6711

## LLC DISSOLUTION OR WITHDRAWAL FLORIDA TITLE INSURANCE AGENCY PARTNERS, LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu

Help

1. HARRIS



H15000260362

## ARTICLES OF DISSOLUTION FLORIDA TITLE INSURANCE AGENCY PARTNERS, LLC

FLORIDA TITLE INSURANCE AGENCY PARTNERS, LLC, a Florida limited liability company (the "Company"), hereby delivers these Articles of Dissolution pursuant to the provisions of Section 605.0707 of the Florida Revised Limited Liability Company Act for the purpose of dissolving the Company.

- 1. The name of the Company is FLORIDA TITLE INSURANCE AGENCY PARTNERS, LLC.
- 2. The dissolution is effective when these Articles of Dissolution are filed with the Florida Department of State.
- 3. The occurrence that resulted in the dissolution was the affirmative vote of the majority in interest of the members of the Company pursuant to Article 4 of the Operating Agreement of the Company.

Dated: October 15, 2015

FLORIDA TITLE INSURANCE AGENCY PARTNERS, LLC

By: ALPHA-OMEGA TITLE SERVICES, INC.,

its Manager

By:
Name: Byron Gibbs Wilson, Jr.

Title: President

#876717-y1

2015 OCT 30 AM 9: 54
SCLOPE IAA : OF STATE
TALLAHASSEE FLORIDA