112000102531

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18 FEB 20 PN 4: 17
SECRETARY OF STATE
AND AHASSEE FLORIDA

K. SALY FEB 23 2018

COVER LETTER

Division of Corporations
RISK Transfer Holdings UC
(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:
Felicia Vestal (Name of Person)
Libertate Insurance
707 E WAShington St
OY 1900 F1 32801 (City/State and Zip Code)
For further information concerning this matter, please call: Felicia Vestal at (407) 613 547 5 (Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount: 25.00 Filing Fee and Certificate of Dissolution Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

Registration Section

TO:

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
	A LIMITED LIABILITY COMPANY 18 FILED
1.	The name of a limited liability company is SECRETARY OF STATE The Articles of Organization were filed on and assigned
2.	The Articles of Organization were filed on and assigned
	document number <u>L12000102531</u>
3.	The delayed effective date the dissolution if not effective on the date of filing: (effective date cannot be prior to or more than 90 days later than date document is received for filing) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
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).
	not operating as Risk Transfer Holdings UC
5.	If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs: Dall Hughes
6 li	Signature of an authorized person or if there are no members, the signature of the person appointed and isted above to wind up the company's activities and affairs: PAUL R HUCHES Printed Name

FILING FEE: \$25.00



February 9, 2018

FELICIA VESTAL 707 E WASHINGTON ST. ORLANDO, FL 32801

SUBJECT: RISK TRANSFER HOLDINGS, LLC

Ref. Number: L12000102531

We have received your document for RISK TRANSFER HOLDINGS, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a FOREIGN LLC, but your entity is a FLORIDA LLC. 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) 245-6051.

Karen A Saly Regulatory Specialist II

Letter Number: 818A00002841

