L22000074246

(Re	questor's Name)			
(Address)				
(Address)				
(Cit	y/State/Zip/Phone	= #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				





500383251925

03/44/22--01038--008 **25.00



National Indemnity Company

A member of the Berkshire Hathaway group of insurance companies

March 7, 2022

Arkansas Secretary of State State Capitol 500 Woodlane Avenue, Suite 256 Little Rock, AR 72201

To whom it may concern,

Milepost Insurance Agency LLC was previously registered in error in Florida as a Domestic LLC. It was our intention to register this company as a Foreign LLC.

Included here are the following:

- Articles of Dissolution for a Limited Liability Company
- · An Application for Registration for a Foreign Limited Liability Company

A pre-paid self-addressed envelope is included for the return of any documents that may need to be sent to my attention.

If anything additional is needed, please do not hesitate to contact me using the information below.

Best,

Sarah E. Starkey

Secretary, Milepost Insurance Agency LLC

sestarkey@nationalindemnity.com

402-916-3814

COVER LETTER

TO:	Registration Section Division of Corporations					
SUBJE	Milepost Insurance Agency LLC					
(Name of Limited Liability Company)						
	closed Articles of Dissolution and fee(s) are submit return all correspondence concerning this matter to	•				
	Sarah E. Starkey					
	(Na	ame of Person)				
	National Indemnity Company					
	(Fi	rm/Company)				
	1314 Douglas Street, Suite 1400					
	(Address)					
	Omaha, NE 68102					
	(City/Se	tate and Zip Code)				
For furt	ther information concerning this matter, please cal	I:				
	Sarah E. Starkey	402 916-3814 at ()				
	(Name of Person)	at ()(Area Code & Daytime Telephone Number)				
Enclosed	d is a check for the following amount:					
	■ \$25.00 Filing Fee and Certificate of Dissolution	☐ \$55.00 Filing Fee, Certificate of Dissolution & Certified Copy (additional copy is enclosed)				
	Mailing Address: Registration Section Division of Corporations	Street Address: Registration Section Division of Corporations				
P.O. Box 6327 Tallahassee, FL 32314		The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303				

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1. The name of a limited lia Milepost Insurance Agency				
2. The Articles of Organiza	tion were filed on $\frac{2/14/2022}{1}$		and assigned	
document number L2200	0074246	_		
Note: If the date inserted	te the dissolution if not effect tive date cannot be prior to or more in this block does not meet the ffective date on the Department	applicable statutory fili	ing: 3/1/2022 ate document is received for filing) ng requirements, this date will not be	
4. A description of occurrer 605.0707, Florida Statute	nce that resulted in the limite s. (copy 605.0707 on back co	d liability company's over letter).	dissolution pursuant to section	
	a domestic LLC when it was	·	tered as a foreign LLC	
(NE-domiciled). Filing	dissolution in FL and re-filin	g as a foreign LLC.		
 If there are no members, activities and affairs: 	enter the name and address of Managers:	of the person appointe	ed to wind up the company's	
	Donald F. Wurster, 1314 I	Donald F. Wurster, 1314 Douglas Street, Suite 1400, Omaha, NE 68102		
	Dale D. Geistkemper, 131	Dale D. Geistkemper, 1314 Douglas Street, Suite 1400, Omaha, NE 68102		
6. Signature of an authorize above to wind up the compa	ed person or if there are no many's activities and affairs:	embers, the signature	e of the person appointed and liste	
Horah 3 At	arku,	Sarah E. Starkey		
Signature		Prin	ited Name	

FILING FEE: \$25.00