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(Requestor's Name)				
(Address)				
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10. 10. 15. 15.				
(City/State/Zip/Phone #)				
☐ PICK-UP ☐ WAIT ☐ MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
<u> </u>				
Special Instructions to Filing Officer:				
J. HORNE				
OCT 2 4 2024	ł			
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Office Use Only



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2024 OCT -7 F1 3: 11

COVER LETTER

TO:

	istration Section sion of Corporations						
JBJECT:	Agent2agent Insurance Consulting, LLC						
(Name of Limited Liability Company)							
ne enclosed	Articles of Dissolution and fee(s) are submit	tted for filing.					
	all correspondence concerning this matter to						
	Jeffrey Scott Gregory						
	(Na	me of Person)					
	Agent2agent Insurance Consulting, LLC						
	(Fir	m/Company)					
	246 Garden Lane Drive						
		(Address)					
	Santa Rosa Beach, FL 32459						
	(City/Sta	ate and Zip Code)					
r further ir	nformation concerning this matter, please call	J:					
Jeff	rey Scott Gregory	404 771-5087					
	(Name of Person)	(Area Code & Daytime Telephone Number)					
closed is a c	theck 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)					
	iling Address:	Street Address:					
-	gistration Section	Registration Section					
	vision of Corporations D. Box 6327	Division of Corporations The Centre of Tallahassee					
-	lahassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303					

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

	FILED
2024 OC	T-7 PT 3:12

1 .	The name of a limited liabil Agent2agent Insurance Consu	• •	2024 OCT -7 PT	3: 12		
2.	The Articles of Organizatio	n were filed on December 12, 2023	and assigned			
	document number 1.23(00)5	19078				
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 605.0707, Florida Statutes, (that resulted in the limited liability copy 605,0707 on back cover lett	ity company's dissolution pursuant to	section		
	Retiring from the business		,			
•	Retiring from the business If there are no members, en activities and affairs:	ter the name and address of the po Jeffrey Scott Gregory	erson appointed to wind up the compa	any s		
		246 Garden Lane Drive				
		Santa Rosa Beach, FL 32459				
5. abo	Signature of an authorized pove to wind up the company	's activities and affairs:	s, the signature of the person appointed	d and liste		
_	Signature		Printed Name			
/						

FILING FEE: \$25.00