

Divisions of Corporations Florida Department of State 409 East Gaines Street Tallahassee, FL 32399

200002829662--0 -04/05/39--01128--017 \*\*\*\*\*43,75 \*\*\*\*\*43,75

Re: Network Title Insurance Agencies of Florida, Inc.

Dear Sir or Madam:

On behalf of the above-referenced corporation, enclosed is the following:

One original of the Articles of Dissolution for the above referenced corporation; and

2. Our check number 30002936, made payable to the Department of State in the amount of \$43.75 to cover the required filing and certified copy fee.

If you have any questions regarding this filing, please feel free to contact me at (949) 622-4396.

Respectfully,

Lisa Campbell

Corporate Licensing

## ARTICLES OF DISSOLUTION

Pursuant to section 607.1403, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

FIRST:	The name of the corporation is: NETWORK TITLE INSURANCE AGENCIES	ŌF FLORIDA,	INC.
SECOND:	The date dissolution was authorized: MARCH 1, 1999		<u> </u>
THIRD:	Adoption of Dissolution (CHECK ONE)	99 AL	
	solution was approved by the shareholders. The number of votes cast sufficient for approval.	ARCHARISTON AM	on T
☐ Diss	olution was approved by vote of the shareholders through voting grou	2	O
T ei	The following statement must be separately provided for each voting g ntitled to vote separately on the plan to dissolve:	roup	
The	number of votes cast for dissolution was sufficient for approval by	- <u></u>	
-	(voting group)	<del>_</del>	
Sign	ned this 19TH day of MARCH , 19 9	9 <u> </u>	
Signature _	m'grisfonestano		
	(By the Chairman or Vice Chairman of the Board, President, or other officer)	_	
	M'LISS JONES KANE (Typed or printed name)		
	(x) post or printed name)	-	
	SENIOR VICE PRESIDENT AND SECRETARY  (Title)		
	` <b>/</b>		