

A78517

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6380

From:

Account Name : AUTONATION
Account Number : I20000000096
Phone : (954) 769-7285
Fax Number : (954) 769-6311

**DISSOLUTION OR WITHDRAWAL
MECHANICAL WARRANTY PROTECTION, INC.**

Certificate of Status	0
Certified Copy	1
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FILED
12 APR 10 AM 10:32
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TALLAHASSEE, FLORIDA

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APR 11 2012

T. ROBERTS

#120000439273

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: DISSOLUTION

DOCUMENT NUMBER: M78517

The enclosed Articles of Dissolution and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

JUDITH PUIGNAU

(Name of Contact Person)

AUTONATION, INC.

(Firm/Company)

200 SW 1ST AVENUE, 14TH FLOOR

(Address)

FORT LAUDERDALE, FL 33301

(City/State and Zip Code)

For further information concerning this matter, please call:

JUDITH PUIGNAU

(Name of Contact Person)

at (954) 769-2771

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☒ \$35 Filing Fee ☐ \$43.75 Filing Fee & Certificate of Status ☒ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) ☐ \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)

MAILING ADDRESS:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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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 as currently filed with the Florida Department of State:

MECHANICAL WARRANTY PROTECTION, INC.

SECOND: The document number of the corporation (if known): M78517

THIRD: The date dissolution was authorized: 3/21/2012

Effective date of dissolution if applicable: _____
(no more than 90 days after dissolution file date)

FOURTH: Adoption of Dissolution (CHECK ONE)

☒ Dissolution was approved by the shareholders. The number of votes cast for dissolution was sufficient for approval.

☐ Dissolution was approved by the shareholders through voting groups.

The following statement must be separately provided for each voting group entitled to vote separately on the plan to dissolve:

The number of votes cast for dissolution was sufficient for approval by

(voting group)

Signature:

Michael E. Maroone

(By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary)

MICHAEL E. MAROONE

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

Filing Fee: \$35

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