100000029681

(Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
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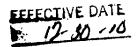
COVER LETTER

TO: Amendment Section

Division of Corporations		
SUBJECT: DISSOLUTION		
DOCUMENT NUMBER: P00000029681		
The enclosed Articles of Dissolution and fee are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
FRANCISCO IBARRA		
(Name of Contact Person)		
(Firm/Company)		
1904 SW 17 AVE. #6 (Address)		
(Address)		
MIAMI, FI, 33145 (City/State and Zip Code)		
(City/State and Zip Code)		
For further information concerning this matter, please call:		
FRANCISCO IBARRA at (305) 8122943 (Name of Contact Person) (Area Code & Daytime Telephone Number)		
Enclosed is a check for the following amount:		
▼\$35 Filing Fee \$43.75 Filing Fee & \$43.75 Filing Fee & \$52.50 Filing Fee, Certificate of Status Certified Copy Certificate of Status & (Additional copy is enclosed) (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		

ARTICLES OF DISSOLUTION

4 . .



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:	
	A-ONE DISCOUNT INSURANCE, INC.	
SECOND:	The document number of the corporation (if known): P00000029681	
THIRD:	The date dissolution was authorized: 12-15-2010	
	Effective date of dissolution <u>if applicable:</u> 12-30-2010 (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: & Secure Coleveri 50	
	(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)	
	RAMONA ECHEVERRI	
	(Typed or printed name of person signing)	
	DIRECTOR	
	(Title of person signing)	

Filing Fee: \$35