PDD000099241

(Re	questor's Name)	
·		
(Ad	dress)	
(Ad	dress)	
(6)	y/State/Zip/Phon	-40
(Cit	y/State/Zip/Pnon	e <i>#}</i>
PICK-UP	WAIT	MAIL
(Bu	sin ess Entity Na	me)
(Do	cument Number	
100	ourners sumber	•
Certified Copies	Certificate	s of Status
Special Instructions to	Filing Officer:	

Office Use Only





400029453724

03/01/04--01031--002 **70.00



TRANSMITTAL LETTER

<u>TRANSMITTA</u>	
TO: Amendment Section Division of Corporations	ENCY, INC.
SUBJECT: KEYS INSURANCE AGE	ENCY, INC.
DOCUMENT NUMBER: P000000992	41
The enclosed Articles of Dissolution and fee are	e submitted for filing.
Please return all correspondence concerning this	matter to the following:
KARL BECKMEYER	· · · · · · · · · · · · · · · · · · ·
(Name of Perso	n)
TIB BANK OF THE	KEYS
(Name of Firm)	(Company)
599 9th STREET	NORTH
(Addre	oss)
NAPLES, FL 34	102
(City/State/and	Zip Code)
For further information concerning this matter, p	lease call:
KARL BECKMEYER	at (²³⁹) 659-5858
- (Name of Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
Certificate of Status Ce (A	#3.75 Filing Fee & S52.50 Filing Fee, crtified Copy dditional copy is cclosed) S52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)
MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	STREET ADDRESS: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

March 9, 2004

KARL BECKMEYER
POST OFFICE BOX 2808
KEY LARGO, FL 33037-7808

SUBJECT: KEYS INSURANCE AGENCY, INC.

Ref. Number: P00000099241

We have received your document for KEYS INSURANCE AGENCY, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The application/form submitted does not meet the requirements of this office; please complete the attached application/form.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6964.

Letter Number: 804A00015569

Irene Albritton Document Specialist

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 Department of State: KEYS INSURANCE AGENCY, INC.		
SECOND:	The document number of the corporation (if known): P00000099241		
THIRD:	The date dissolution was authorized: January 27, 2004		
	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 of 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		
	Signed this 22 day of March , 2004.		
	Signature:		
	(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)		
	EDWARD V. LETT		
	(Typed or printed name of person signing) AHASS PRESIDENT		
	(Title of person signing)		
	Filing Fee: \$35		