

PO1000120277

(Requestor's Name)

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DEC 30 11 4:08
TALLAHASSEE, FLORIDA
10/04



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 112160 8466A

AUTHORIZATION : *Patricia Pigato*

COST LIMIT : \$ 52.50

ORDER DATE : December 29, 2004

ORDER TIME : 3:46 PM

ORDER NO. : 112160-035

CUSTOMER NO: 8466A

CUSTOMER: H. Samuel Lind, Esq.
Fifth Third Bank
Mail Drop # 10at76
38 Fountain Square Plaza
Cincinnati, OH 45263

DOMESTIC FILINGS

NAME: WEST COAST GUARANTY TITLE
INSURANCE COMPANY

XX ARTICLES OF DISSOLUTION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY

XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Susie Knight - EXT# 2956

EXAMINER'S INITIALS: _____

EFFECTIVE DATE
1/1/05

ARTICLES OF DISSOLUTION

FILED

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

04 DEC 30 PM 4:08
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FIRST: The name of the corporation as currently filed with the Department of State:

West Coast Guaranty Title Insurance Company

SECOND: The document number of the corporation (if known): P01000120277

THIRD: The date dissolution was authorized: December 27, 2004

Effective date of dissolution if applicable: 1/1/2005

(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.

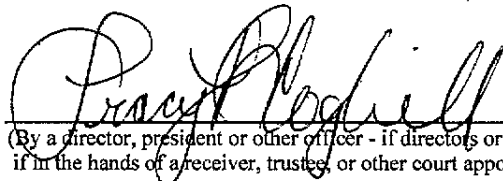
The following statement must be separately provided for each voting group entitled to vote separately on the plan to dissolve:

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

(voting group)

Signed this 27 day of December, 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)

Tracy L. Coghill

(Typed or printed name of person signing)

President

(Title of person signing)

Filing Fee: \$35