

PD20000006349

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(Business Entity Name)

(Document Number)

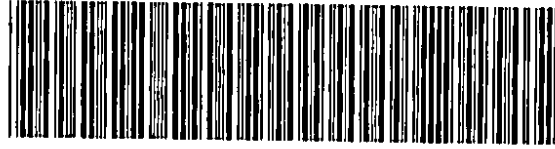
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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NOV 21 2017

I ALBRITTON



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 15, 2017

MARK PAPA
LEGACY ADVISORS-WEALTH PRESERVATION
13224 MALACHITE DR
BRADENTON, FL 34211

SUBJECT: LEGACY ADVISORS-WEALTH PRESERVATION AND
INSURANCE BROKERAGE, INC.
Ref. Number: P02000006349

We have received your document for LEGACY ADVISORS-WEALTH PRESERVATION AND INSURANCE BROKERAGE, INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must state the date the dissolution was authorized.

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) 245-6050.

Irene Albritton
Regulatory Specialist II

Letter Number: 817A00023187

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:

LEGACY ADVISORS - WEALTH PRESERVATION AND INSURANCE BROKERAGE INC.

SECOND: The document number of the corporation (if known): PO2 00000 6349

THIRD: The date dissolution was authorized: NOV 12, 2017

Effective date of dissolution if applicable: _____

(no more than 90 days after dissolution file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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: _____

(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)

MARK PAPA

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

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TALLAHASSEE, FLORIDA