

P04000022579

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

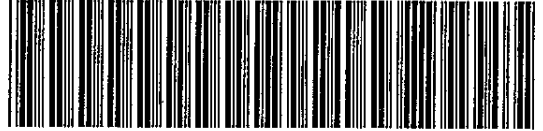
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000040448060

09/02/04--01025--010 **35.00

FILED

04 SEP -21 PM 3:47

CLERK OF STATE
TALLAHASSEE, FLORIDA

Ps 5/5/04
Diss

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Articles of Dissolution - Mr. Auto T + R Reimbursement Program, Inc

DOCUMENT NUMBER: P 040000 22579

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

Please return all correspondence concerning this matter to the following:

David Castillo
(Name of Person)

All Alliance Insurance, Inc.
(Name of Firm/Company)

515 N. Semoran Blvd.
(Address)

Orlando FL 32807
(City/State/and Zip Code)

For further information concerning this matter, please call:

David Castillo at (407) 281-4141
(Name of Person) (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, Florida 32314

STREET ADDRESS:
Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

ARTICLES OF DISSOLUTION

Pursuant to section 607.1401, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

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

Mr. Auto T & R Reimbursement Program, Inc.

SECOND: The document number of the corporation (if known): P04000022579

THIRD: The file date of the articles of incorporation was: 1/23/04

FOURTH: (CHECK AT LEAST ONE BOX)

☐ None of the corporation's shares have been issued.

☒ The corporation has not commenced business.

FIFTH: No debt of the corporation remains unpaid.

SIXTH: The net assets of the corporation remaining after winding up have been distributed to the shareholders, if shares were issued.

SEVENTH: Adoption of Dissolution (CHECK ONE)

☒ A majority of the incorporators authorized the dissolution.

☐ A majority of the directors authorized the dissolution.

Signed this 31 day of August, 2004.

Signature: David Castillo

(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.)

David Castillo

(Typed or printed name of person signing)

Vice President.

(Title of person signing)

Filing Fee: \$35

FILED
04 SEP -2 PM 3:47
DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA