

P040001D8046

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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FILED
06 SEP 11 AM 11:38
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Disa. 8

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Dissolution of FL Profit Corp.

DOCUMENT NUMBER: PO4000 108046

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

Please return all correspondence concerning this matter to the following:

Barbara Henry
(Name of Contact Person)

(Firm/Company)

2810 NE 14th St.
(Address)

Orlando FL 32807
(City/State and Zip Code)

For further information concerning this matter, please call:

(Name of Contact Person) at (_____) _____
(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount: additional \$10 fee - as instructed

- ☐ \$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, FL 32314

STREET ADDRESS:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 1, 2006

Barbara Henry
2810 NE 14th St.
Ocala, FL 34470

SUBJECT: TRINITY INSURANCE & FINANCIAL SERVICES, INC.
Ref. Number: P04000108046

We have received your document for TRINITY INSURANCE & FINANCIAL SERVICES, INC. and check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The wrong form was submitted to dissolve the subject entity which is a Florida corporation and not a limited liability company. Enclosed is the correct form. An additional filing fee of \$10 is due.

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) 245-6901.

Susan Payne
Senior Section Administrator

Letter Number: 706A00053599

RECEIVED
06 SEP 11 AM 8:00
DIVISION OF CORPORATIONS

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 the Florida Department of State:

Trinity Insurance + Financial Services, Inc.

SECOND: The document number of the corporation (if known): P04000108046

THIRD: The file date of the articles of incorporation: 7/21/04

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.

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.)

Barbara Henry

(Typed or printed name of person signing)

Owner, President

(Title of Person Signing)

FILED
06 SEP 11 AM 11:38
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Filing Fee: \$35