P05000009943

(Re	equestor's Name)			
(Ac	ldress)			
(Ac	ddress)			
,	ŕ			
(City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL		
(Bı	ısiness Entity Nar	ne)		
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				
		`		
				

Office Use Only



600138723086

12/18/08--01017--025 **43.75

08 DEC 18 PM 1: 29

SECRETARY OF STATE DIVISION OF CORPORATIONS

ANT DISSICUE

OD 12/2018

COVER LETTER

Division of Corporations				
SUBJECT: IGWT Insurance Serv	rices, Inc.			
DOCUMENT NUMBER: P0500000	9963			
The enclosed Articles of Dissolution and	fee are submitted for filing.			
Please return all correspondence concerning this matter to the following:				
Arthur C. Mann				
(Name of Contact Person)				
IGWT Insurance Services, Inc.				
(Firm/Company)				
285 Uptown Blvd., Apt. 606				
	address)			
Altamonte Springs, FL 32701				
	ate and Zip Code)			
For further information concerning this ma	atter, please call:			
Art Mann	at (_813) 447-9979			
(Name of Contact Person)	(Area Code & Daytime Telephone Number)			
Enclosed is a check for the following amou	unt:			
□\$35 Filing Fee \$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & S52.50 Filing Fee, Certified Copy (Additional copy is enclosed) S52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)			
MAILING ADDRESS: Amendment Section	STREET ADDRESS:			
Amendment Section Division of Corporations	Amendment Section Division of Corporations			
P.O. Box 6327	Clifton Building			
Tallahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301			

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:				
	IGWT Insurance Services, Inc.				
SECOND:	The document number of the corporation (if known): P05000009963				
THIRD:	The date dissolution was authorized: 12/15/2008				
	Effective date of dissolution if applicable: (no more than 90 days after dissolution	ı file date)			
FOURTH:	Adoption of Dissolution (CHECK ONE)				
	Dissolution was approved by the shareholders. The number of votes cast was sufficient for approval.	for diss	solution		
	Dissolution was approved by the shareholders through voting groups.				
	The following statement must be separately provided for each voting group e to vote separately on the plan to dissolve:	entitled			
	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)	08 DEC 18 PM J:	SECRETARY OF STATE DIVISION OF CORPORATION		
		29	NS.		
	Arthur C. Mann (Typed or printed name of person signing)				
	President				
	(Title of person signing)				

Filing Fee: \$35