## P05000084085

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SECRETARY OF STATE

## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: 515 Insurance Inc
DOCUMENT NUMBER: P050000 840 85
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Sheepi L. Swartzel (Name of Contact Person)
5L5 Insiwance Inc. (Firm/Company)
Pencipal: 4020 Newhern Rd #400, Gamesville FC 3260
Perripal: 4020 Newhern Rd #400, Gamesville Fe 3260 (Address)  New Mailing: 15105 NW 150 Ave #1002, Alachua, Pe (City/State and Zip Code)  326
For further information concerning this matter, please call:
Sheepi L. Swartzelat (352) 494-7691 (Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
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MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327  STREET ADDRESS: Amendment Section Division of Corporations Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

Tallahassee, FL 32314

## 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:
	5LS Insurance, Inc.
SECOND:	The document number of the corporation (if known): P0500084085
THIRD:	The file date of the articles of incorporation: $\frac{0b/10/2005}{}$
FOURTH:	(CHECK AT LEAST ONE BOX)
	The file date of the articles of incorporation:      Ob   10   2005
	☐ 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.
Signa	(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.)
	SHERRI L. SWARTZEL  (Typed or printed name of person signing)
	PRESIDENT (Title of Person Signing)

Filing Fee: \$35