## Po5000 109394

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(Ad	ldress)	
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## **COVER LETTER**

TO: Amendment Section

Division of Corporations	
SUBJECT: Acticles of Dissolution for S	Strategic Automotive Protection
DOCUMENT NUMBER: P0500010	9394
The enclosed Articles of Dissolution and fee are subr	mitted for filing.
Please return all correspondence concerning this matter	er to the following:
Scott Turnclift (Name of Contact Pe	erson)
Strategic Automotive Protect	Rion, Inc.
P.O. Box 728 (Address)	5
(Address)	
Hudson, F2 346	.JU
(City/State and Zip	Code)
For further information concerning this matter, please	call:
Scott Tuncliff at (	877 ) 727-45-37 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
Certificate of Status Certified	nal copy is Certified Copy
MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327	STREET ADDRESS: Amendment Section Division of Corporations 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:
	Strategic Automotive Protection, Inc.
SECOND:	The document number of the corporation (if known): P05000109394
THIRD:	The date dissolution was authorized: December 31, 2010
	Effective date of dissolution if applicable: December 31, 2010  (no more than 90 days after dissolution file date)
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)
	Switt J. Turnel, Ff (Typed or printed name of person signing)
	President (Title of parent visusia)

Filing Fee: \$35