P06000031400

(Requestor's Name)	
(ixequesion similar)	•
(Address)	
(Address)	
(City/State/Zip/Phone #)	
	•
PICK-UP WAIT	MAIL
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Statu	ıs
Special Instructions to Filing Officer:	ŀ
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COVER LETTER

TO: Amendment Section

Division of Corporations	
SUBJECT: Notice of Corporate Dis	solution
DOCUMENT NUMBER: P06000031	400
The enclosed Articles of Dissolution and fee	e are submitted for filing.
Please return all correspondence concerning	this matter to the following:
TONY LOPEZ III	
·	ontact Person)
CAESAR INSURANCE AGENCY, INC. (Firm/Company)	
PO BOX 470906	Company
(Add	dress)
CELEBRATION, FL 34747	
(City/State	and Zip Code)
For further information concerning this matter	er, please call:
TONY LOPEZ III	at (321) 246-4606
(Name of Contact 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 & \$\sum \$52.50 Filing Fee, Certified Copy (Additional copy is enclosed) \$\$\$ 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

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	of State:			
	CAESAR INSURANCE AGENCY, INC.				
SECOND:	The document number of the corporation (if known): P06000031400				
THIRD:	The date dissolution was authorized: MARCH 15, 2009				
	Effective date of dissolution if applicable: (no more than 90 days after dissolution)	n file date)	_		
FOURTH:	Adoption of Dissolution (CHECK ONE)				
	Dissolution was approved by the shareholders. The number of votes cast was sufficient for approval.	for dissolu	ation		
	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	09 A	SECRE DIVISION		
	an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary)	09 APR 16	OF CORPO		
	TONY LOPEZ III	三	STA		
	(Typed or printed name of person signing)	AH 11: 29	F STATE PORATIONS		
	PRESIDENT				
	(Title of person signing)				

Filing Fee: \$35