# P07000000587

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SECRETARY OF STATE
TALLAHASSEF, FLORIO

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## **COVER LETTER**

Division of Corporations

SUBJECT: Community National Insurance, Inc.

DOCUMENT NUMBER: P0700000587

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

Please return all correspondence concerning this matter to the following:

R. Edward Cooley

(Name of Contact Person)

Shepherd, McCabe & Cooley

(Firm/Company)

1450 S.R. 434 West, Suite 200

(Address)

Longwood, FL 32750
(City/State and Zip Code)

For further information concerning this matter, please call:

R. Edward Cooley
(Name of Contact Person)

at (407) 830-9191
(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

**TO:** Amendment Section

### **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 607.1401, 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	nt of State:	
	Community National Insurance, Inc.		
SECOND:	The document number of the corporation (if known): P07000005	<u>587</u>	
THIRD:	The file date of the articles of incorporation: 01/02/2007		
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 disto the shareholders, if shares were issued.	stributed	
SEVENTH:	Adoption of Dissolution (CHECK ONE)	OL SE TALL	
,	A majority of the incorporators authorized the dissolution.	9 MAR CRET AHA	CALAPT.
	A majority of the directors authorized the dissolution.	12 AM 8: 50 ARY OF STATE SSEE, FLORIDA	
Sign	ature:		
	(By a director, president or other officer - i directors or officers have not been selected, by a in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.)	n incorporator - if	
	Manuel Tato		
	(Typed or printed name of person signing)		
	President		
	(Title of Person Signing)		

Filing Fee: \$35