

Florida Department of State

Division of Corporations Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H09000203908 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850) 617-6380

From:

Account Name : EXPRESS CORPORATE FILING SERVICE INC.

Account Number : I2000000146

Phone : (305)444-4994

Fax Number : (305)444-4977

DISSOLUTION OR WITHDRAWAL

AT TAMIAMI SUPER INSURANCE, INC.

Certificate of Status	0
Certified Copy	0 .
Page Count	02
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Hiling Menu

https://efile.sunbiz.org/scripts/efilcovr.exe

Help

09/18/2009

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 filled with the Florida Department of State:			
,	AT TAMIAMI SUPER INSURANCE, INC.			
SECOND:	The document number of the corporation (if known): P07000095103			
THIRD:	The date dissolution was authorized: 09-18-09			
	Biffective date of dissolution if applicable: (no more than 90 days after dissolution to	filo 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			
		圣照 8		
	(voting group)	09 SEP 18	The state of the s	
	Signature:	AMII: 46 Y OF STATE SEE, FLORIE		
	(By a director, president or other officer - if directors or officers have not been selected, by an inestigator - if in the hands of a receiver, nuclea, or other court oppointed fiduciary, by that fiduciary)	A HOLE		
	JENNIFER LLULL			
	(Typed or printed name of person signing)			
	P/D			
	(Title of person signing)			