

P07000107 199

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

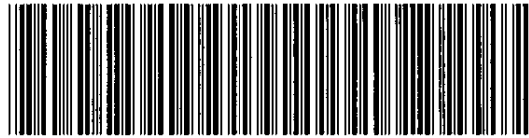
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Office Use Only



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*less with
notice*

10/27/09--01005--022 **52.50

RECEIVED
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
2009 OCT 27 PM 1:02
NOT RETURNED
TO ACKNOWLEDGE
SUFFICIENCY OF FILING

FILED
09 OCT 27 PM 1:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

AR
10/27/09

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Insured's Public Action Coalition, Inc.

DOCUMENT NUMBER: P07000107199

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

Please return all correspondence concerning this matter to the following:

Wilbur E. Brewton, Esquire

(Name of Contact Person)

Brewton Plante, P.A.

(Firm/Company)

225 South Adams Street, Suite 250

(Address)

Tallahassee, FL 32301

(City/State and Zip Code)

For further information concerning this matter, please call:

Wilbur E. Brewton

(Name of Contact Person)

at (850) 222-7718

(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 & Certified Copy (Additional copy is enclosed) ☒ \$52.50 Filing Fee, Certificate of Status & 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:

FILED

09 OCT '27 PM 1:05

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FIRST: The name of the corporation as currently filed with the Florida Department of State:
Insured's Public Action Coalition, Inc.

SECOND: The document number of the corporation (if known): P07000107199

THIRD: The date dissolution was authorized: 09/22/2009

Effective date of dissolution if applicable: _____
(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)

Mark D. Boardman

(Typed or printed name of person signing)

President/Secretary, Sole Director

(Title of person signing)

Filing Fee: \$35

Notice of Corporate Dissolution

This notice is submitted by the dissolved corporation named below for resolution of payment of unknown claims against this corporation as provided in s. 607.1407, F.S.

This "*Notice of Corporate Dissolution*" is optional and is not required when filing a voluntary dissolution.

Name of Corporation: Insured's Public Action Coalition, Inc.

Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the *Articles of Dissolution*.

Description of information that must be included in a claim:

Name, Address, Telephone number

Nature of the claim

Amount of the claim, if any

Date Incurred

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

Mark D. Boardman

Post Office Box 940608

Maitland, Florida 32794

A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

Mark D. Boardman

Printed Name of the Person Filing



Signature of the Person Filing

Fee: No charge if included with Articles of Dissolution. If filed separately \$35.00