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ONVISION OF CORPORATION

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COVER LETTER

TO: Amendment Section

Tallahassee, FL 32314

Division of Corporations	
SUBJECT: Global Tusurana	e Recruiters Inc.
DOCUMENT NUMBER: P08000001	201
The enclosed Articles of Dissolution and fee are submitted	ed for filing.
Please return all correspondence concerning this matter to	the following:
Christophe Alfako (Name of Contact Person	
Global Insurance R (Firm/Company)	•
4098 NW 88th Lve. Suite 102,	<i>B</i> ₁
(**************************************	
Sunn'se, FL 33351 (City/State and Zip Cod	le)
For further information concerning this matter, please call	
(Name of Contact Person) at (95)	ea Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
✓\$35 Filing Fee ☐\$43.75 Filing Fee & ☐\$43.75 Filin	- ·
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 of State:	;
	Global Insurance Recruiters Inc	
SECOND:	The document number of the corporation (if known): P080000 20	
THIRD:	The file date of the articles of incorporation: $\frac{1/04/08}{}$	
FOURTH:	(CHECK AT LEAST ONE BOX)	0
	None of the corporation's shares have been issued.	08 MAR 17 Ph S
	The corporation has not commenced business.	_
FIFTH:	No debt of the corporation remains unpaid.	ָרָאָ על ני
SIXTH:	The net assets of the corporation remaining after winding up have been distributed to the shareholders, if shares were issued.	1
SEVENTH:	Adoption of Dissolution (CHECK ONE)	
	A majority of the incorporators authorized the dissolution.	
	A majority of the directors authorized the dissolution.	
Sign	(By a director, president or other officer - if directors or officers have not been selected, by an incorporator in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.)	- if
	Christophe Akaro (Typed or brinted name of person signing)	
	(Title of Person Signing)	
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Filing Fee: \$35