

PO9000015227

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

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Certified Copies _____ Certificates of Status _____

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8-23-10



600184048756

08/20/10--01022--009 **35.00

EFFECTIVE DATE
8-31-10

FILED
2010 AUG 20 AM 11:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DISC

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Key Insurance Solutions, Inc.

DOCUMENT NUMBER: P09000015227

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

Please return all correspondence concerning this matter to the following:

Steve Lund

(Name of Contact Person)

(Firm/Company)

17829 Lake Lucy Lane

(Address)

Groveland, FL 34736

(City/State and Zip Code)

For further information concerning this matter, please call:

Steve Lund

(Name of Contact Person)

at (352) 267-5169

(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

EFFECTIVE DATE
8/31/10

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 State:
Key Insurance Solutions, Inc.

SECOND: The document number of the corporation (if known): P09000015227

THIRD: The date dissolution was authorized: 08/01/2010

Effective date of dissolution if applicable: 08/31/2010
(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)

Steve Lund

(Typed or printed name of person signing)

Director

(Title of person signing)

Filing Fee: \$35

2010 AUG 20 AM 11:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED