

P09000032790

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

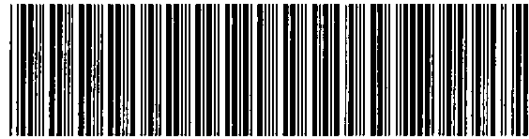
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Office Use Only



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04/25/11--01043--013 **35.00

11 MAY 12 PM 2:23
SECRETARY OF STATE
TALLAHASSEE, FL 32304

APPROVED
AND
FILED

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5/2/11
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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Southern Trust Insurance

DOCUMENT NUMBER: P09000032790

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

Please return all correspondence concerning this matter to the following:

Daniel Munoz

Name of Contact Person

Southern Trust Insurance

Firm/Company

4767 New Broad Street

Address

Orlando, FL 32814

City/State and Zip Code

dmunoz120@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Daniel Munoz

Name of Contact Person

at **(407) 453-9243**

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 28, 2011

DANIEL MUNOZ
4767 NEW BROAD ST
ORLANDO, FL 32814

SUBJECT: SOUTHERN TRUST INSURANCE INC.
Ref. Number: P09000032790

We have received your document for SOUTHERN TRUST INSURANCE INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You can not file Articles of Revocation on an active corporation. I am sending you Articles of Dissolution to file in case that is what you were wanting to do.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6957.

Tracy L Lemieux
Regulatory Specialist II

Letter Number: 211A00010384

RECEIVED
11 MAY 12 AM 8:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

Southern Trust Insurance

SECOND: The document number of the corporation (if known): P09000032790

THIRD: The file date of the articles of incorporation: _____

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 distributed to the shareholders, if shares were issued.

SEVENTH: Adoption of Dissolution (CHECK ONE)

☒ A majority of the incorporators authorized the dissolution.

☐ A majority of the directors authorized the dissolution.

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.)

Daniel Munoz

(Typed or printed name of person signing)

CEO

(Title of Person Signing)

Filing Fee: \$35

11 MAY 12 PM 2:23
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
FILED