P10000051677

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COVER LETTER

TO: Amendment Section

Division of Corporations SUBJECT: Dissolution of Insurance Recovery Specialty, Inc. DOCUMENT NUMBER: P10000051677 The enclosed **Articles of Dissolution** and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Robert J. Moraitis, Esquire (Name of Contact Person) Robert J. Moraitis, P.A. (Firm/Company) 1310 SE 3rd Avenue (Address) Fort Lauderdale, Florida 33316 (City/State and Zip Code) For further information concerning this matter, please call: at (954) 525-9600 (Area Code & Daytime Telephone Number) Robert J. Moraitis, Esquire (Name of Contact Person) Enclosed is a check for the following amount: Certificate of Status Certified Copy Certificate of Status & (Additional copy is Certified Copy enclosed) (Additional copy is enclosed) **MAILING ADDRESS:** STREET ADDRESS: Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building Tallahassee, FL 32314 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:	
	Insurance Recovery Specialty, Inc.	
SECOND:	The document number of the corporation (if known): P10000051677	
THIRD:	The file date of the articles of incorporation: June 18, 2010	
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.	
A A		
Sign	(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.)	
	THERESA BRUNETTO	
	. (Typed or printed name of person signing)	
	PRESIDENT/DIRECTOR	
	(Title of Person Signing)	

Filing Fee: \$35