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10/11/07--01036--010 **52.50

EFFECTIVE DATE

SECRETARY OF STATE OF CORPORATIONS DIVISION OF CORPORATIONS

03/16/16/07

COVER LETTER

TO: Amendment Section
Division of Corporations
SUBJECT: DISSOLUTION of Albert INSURANCE AGENCY INC
DOCUMENT NUMBER:
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
TAMES ALBERT (Name of Contact Person)
ALBERT ENSURANCE AGENCY INCORPORATED (Firm/Company)
t
3430 EAST LAKE Rd. Suite #2 (Address)
(Address) PACM HARBON Florida 34685 (City/State and Zip Code)
(City/State and Zip Code)
For further information concerning this matter, please call:
TAMES ALbert at (727) 185-4469 (Name of Contact Person) (Area Code & Daytime Telephone Number)
(Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following-amount:
□ \$35 Filing Fee □ \$43.75 Filing Fee & □ \$43.75 Filing Fee & □ \$43.75 Filing Fee & □ \$52.50 Filing Fee, Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional copy is enclosed)
MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327 STREET ADDRESS: Amendment Section Division of Corporations Clifton Building

Tallahassee, FL 32314

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	n: EFFECTIVE DATE
FIRST:	The name of the corporation as currently filed with the Florida Department of State:
	ALBERT INSURANCE AGENCY, INC.
SECOND:	The document number of the corporation (if known):
THIRD:	The date dissolution was authorized: October 8, 2007
	Effective date of dissolution if applicable: JANUARY 2008 (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 of 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
	2007 SE
	(voting group) CT OF CORPORATION OF
S	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)
	TAMES Albert (Typed or printed name of person signing)
	President (Title of person signing)

Filing Fee: \$35