

P91000023931

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12/31/05

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05 NOV -7 PM 4:25  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

NOV 07 2005

Dis. Office

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Bunker Hill Insurance of Florida, Inc.

**DOCUMENT NUMBER:** P97000023931

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

Please return all correspondence concerning this matter to the following:

Sheldon I. Oster  
(Name of Contact Person)

Bunker Hill Insurance Agency, Inc.  
(Firm/Company)

9821 Katy Freeway, Suite 850  
(Address)

Houston, Texas 77024  
(City/State and Zip Code)

For further information concerning this matter, please call:

Marsha Hammons at ( 713 ) 935-7400  
(Name of Contact Person) (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



RECEIVED  
OCT 31 2005

FLORIDA DEPARTMENT OF STATE  
Glenda E. Hood  
Secretary of State

October 28, 2005

SHELDON I OSTER  
9821 KATY FREEWAY STE 850  
HOUSTON, TX 77024

SUBJECT: BUNKER HILL INSURANCE OF FLORIDA, INC.  
Ref. Number: P97000023931

We have received your document for BUNKER HILL INSURANCE OF FLORIDA, INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The date of adoption/authorization of this document must be a date on or prior to submitting the document to this office, and this date must be specifically stated in the document. If you wish to have a future effective date, you must include the date of adoption/authorization and the effective date. The date of adoption/authorization is the date the document was approved.

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) 245-6927.

Tracy Smith  
Document Specialist

Letter Number: 505A00065307

11-3-05

Sorry, the date should have read October 1, 2005  
Corrected document attached.

RECEIVED  
05 NOV -7 AM 8:00  
DIVISION OF CORPORATIONS

## ARTICLES OF DISSOLUTION

12/31/05

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:

Bunker Hill Insurance of Florida, Inc.

SECOND: The document number of the corporation (if known): P97000023931

THIRD: The date dissolution was authorized: October 1, 2005

Effective date of dissolution if applicable: December 31, 2005  
(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

\_\_\_\_\_  
(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)

Sheldon I. Oster

(Typed or printed name of person signing)

President/Director

(Title of person signing)

FILED  
05 NOV -7 PM 4: 25  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

Filing Fee: \$35

## Notice of Corporate Dissolution

This notice is submitted by the dissolved corporation named below for resolution of payment of unknown claims against this corporation as provided in s. 607.1407, F.S.

This "*Notice of Corporate Dissolution*" is optional and is not required when filing a voluntary dissolution.

Name of Corporation: Bunker Hill Insurance of Florida, Inc.

Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the *Articles of Dissolution*.

Description of information that must be included in a claim:

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Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

9821 Katy Freeway, Suite 850  
Houston, Texas 77024

A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

Sheldon I. Oster

Printed Name of the Person Filing

  
Signature of the Person Filing

**Fee: No charge if included with Articles of Dissolution. If filed separately \$35.00**