## P98000045693

| (Re                     | equestor's Name)   |             |
|-------------------------|--------------------|-------------|
| (Ad                     | dress)             |             |
| (Ad                     | idress)            |             |
| (Cit                    | ry/State/Zip/Phone | e #)        |
| PICK-UP                 | ☐ WAIT             | MAIL        |
| (Bu                     | siness Entity Nan  | ne)         |
| (Do                     | cument Number)     | <del></del> |
| Certified Copies        | _ Certificates     | of Status   |
| Special Instructions to | Filing Officer:    |             |
|                         |                    |             |
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2004 FEB 17 AM 11: 59

Dissolution LFT 2-17-04

## TRANSMITTAL LETTER

| TO: Amendment Section   |
|---|
| Division of Corporations  |
| SUBJECT: ARTICLES OF DISSOLUTION  |
| DOCUMENT NUMBER: <u>P98000045693</u>  |
| The enclosed Articles of Dissolution and fee are submitted for filing.  |
| Please return all correspondence concerning this matter to the following:   |
|   |
| NICHOLAS MATIKAS (Name of Person)   |
| (Name of Person)  |
| MATIKAS INSUPANCE & FINANCIAL SERVICES INC., (Name of Firm/Company)   |
| (Name of Firm/Company)  |
| 130 S. BANAWA RIVER DRIVE   |
| (Address)   |
| MERRITT ISlAND FLORIDA 32952  |
| (City/State/and Zip Code)   |
| For further information concerning this matter, please call:  |
| Minusias Marian 122 1150 - 211  |
| NICHOLAS MATIKAS at (321) 459-0244  (Name of Person) (Area Code & Daytime Telephone Number)   |
| Enclosed is a check for the following amount:   |
| D \$25 Filing Fee V \$42 75 Filing Fee & D \$42 75 Filing Fee & D \$52 50 Filing Fee  |
| □ \$35 Filing Fee \$\ \$43.75 Filing Fee & □ \$43.75 Filing Fee & □ \$52.50 Filing Fee, Certificate of Status Certified Copy  (Additional copy is Certified Copy) |
| . (Additional copy is Certified Copy enclosed) (Additional copy is enclosed)  |
| MAILING ADDRESS: STREET ADDRESS:  |
| Amendment Section Amendment Section   |
| Division of Corporations P.O. Box 6327  Division of Corporations 409 E. Gaines Street   |

Tallahassee, Florida 32399

Tallahassee, Florida 32314



## FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

February 4, 2004

Nicholas Matikas % MATIKAS INSURANCE & FINANCIAL SERVICES 730 South Banana River Drive Merra Island, FL 32952

្នៃSUBJEC၌: MATIKAS INSURANCE & FINANCIAL SERVICES, INC. - Ref. Number: P98000045693

We have received your document for MATIKAS INSURANCE & FINANCIAL SERVICES, INC.. However, the document has not been filed and is being returned for the following:

The document you submitted has been prepared pursuant to nonprofit statutes (chapter 617, Florida Statutes). As the entity was originally filed as a corporation for profit, this document should be filed pursuant to chapter 607, Florida Statutes.

The fee to file articles of dissolution or a certificate of withdrawal is \$35. Certified copies are optional and are \$8.75 for the first 8 pages of the document, and \$1 for each additional page, not to exceed \$52.50.

Please return a copy of this letter along with your document to ensure proper handling.

If you have any questions concerning this matter, please either respond in writing or call (850) 245-6910.

Letter Number: 104A00007510

Louise Flemming-Jackson Document Specialist Supervisor

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314

SECRETARY OF STATE DIVISION OF CORPORATION

## ARTICLES OF DISSOLUTION

2004 FEB 17 AM 11:58

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 Department of State:  |  |  |
|---------|---|--|--|
|         | MATIKAS Insurance & Financial Services, IN  |  |  |
| SECOND: | The document number of the corporation (if known): P9800045693  |  |  |
| THIRD:  | The date dissolution was authorized: MAY 15th 2002  |  |  |
|         | Effective date of dissolution if applicable: (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)  |  |  |
|         | Signed this $15$ day of $MAY$ , $2002$ .  |  |  |
|         | 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) |  |  |
|         | MICHOLAS MATIKAS (Typed or printed name of person signing)  |  |  |
|         | PRESIDENT (Title of person signing)   |  |  |

Filing Fee: \$35