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NEF

NEW ENGLAND FINANCIAL™
A MetLife Affiliate

4190 BELFORT RD. #400
JACKSONVILLE, FL 32216

#

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

600003393746--1

-08/14/00--01097--013

*****35.00 *****35.00

1. _____
(Corporation Name) (Document #)
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| <input type="checkbox"/> Walk in | <input type="checkbox"/> Pick up time _____ | <input type="checkbox"/> Certified Copy |
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NEW FILINGS

- ☐ Profit
- ☐ Not for Profit
- ☐ Limited Liability
- ☐ Domestication
- ☐ Other

OTHER FILINGS

- ☐ Annual Report
- ☐ Fictitious Name

AMENDMENTS

- ☐ Amendment
- ☐ Resignation of R.A., Officer/Director
- ☐ Change of Registered Agent
- ☒ Dissolution/Withdrawal
- ☐ Merger

REGISTRATION/QUALIFICATION

- ☐ Foreign
- ☐ Limited Partnership
- ☐ Reinstatement
- ☐ Trademark
- ☐ Other

FILED
00 SEP 14 AH10:36
SECRETARY OF STATE
TALLAHASSEE FLORIDA

T BROWN SEP 21 2000
Examiner's Initials

ARTICLES OF DISSOLUTION

Pursuant to 607.1401, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

FIRST: The name of the corporation is: Corporate Benefit
Services, Inc.

SECOND: The filing date of the articles of incorporation was: 8-24-98

THIRD: (CHECK ONE)

☐ None of the corporation's shares have been issued.

☒ The corporation has not commenced business.

FOURTH: No debt of the corporation remains unpaid.

FIFTH: The net assets of the corporation remaining after winding up have been distributed to the shareholders, if shares were issued.

SIXTH: Adoption of Dissolution (CHECK ONE)

☐ A majority of the incorporators authorized the dissolution.

☒ A majority of the directors authorized the dissolution.

Signed this 19 day of July 2000.

Signature

Troy D. Tummow
(By the chairman or vice chairman of the board, president, or other officer - if there are no officers or directors, by an incorporator.)

Troy D. Tummow
(Typed or printed name)

President.
(Title)