

P99000001226

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

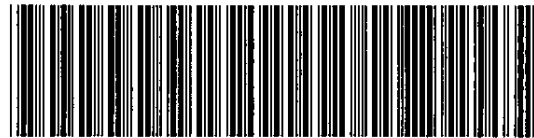
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400074795834

05/19/06--01020--001 **52.50

FILED
06 MAY 19 AM 10:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Amt Diss CC/aus
⑩ 5.30.04

ARTICLES OF DISSOLUTION

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:

FLORIDA ALLIANCE INSURANCE INC.

SECOND: The document number of the corporation (if known): P99000001226

THIRD: The date dissolution was authorized: 5/15/2006

Effective date of dissolution if applicable: 5/16/06
(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 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)

DENNIS WAYNE GORREBEECK

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

Filing Fee: \$35

FILED
06 MAY 19 AM 10:00
TALLAHASSEE, FLORIDA
SECRETARY OF STATE