

P99000017024

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

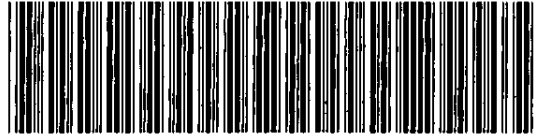
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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12/06/07--01016--015 **35.00

EFFECTIVE DATE
12-31-07

FILED
2007 DEC -6 PM 12:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Dissolution

TB

12-7-07

MR. INSURANCE, INC
821 NW 13TH STREET
GAINESVILLE, FL. 32609

Fl. Dept. of State
Division of Corp.
COVER SHEET

Dissolution of Corporation

Document # P99000017024

Please dissolve Mr. Insurance, Inc effective December 31, 2007 as my Business was sold.
My Forwarding address is 4228 NW 10th Street, Gainesville, Fl. 32609. My phone
number at home is 352-375-1618

If any additional forms are needed kindly e-mail them to mrinsuranceinc@yahoo.com

Sincerely:



Manuel A. Disgdiertt
President

HOME ADDRESS



Mr. Manuel A. Disgdiertt
4228 N.W. 10th Street
Gainesville, FL 32609

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: MR INSURANCE INC DISSOLUTION

DOCUMENT NUMBER: P99000017024

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

Please return all correspondence concerning this matter to the following:

MANUEL A. DISGDIERTT

(Name of Contact Person)

MR. INSURANCE, INC

(Firm/Company)

821 NW 13TH STREET

(Address)

GAINESVILLE, FL. 32609

(City/State and Zip Code)

For further information concerning this matter, please call:

MANUEL A. DISGDIERTT at (352) 375-1618

(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

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:

MR. INSURANCE, INC.

SECOND: The document number of the corporation (if known): P99000017024

THIRD: The date dissolution was authorized: DECEMBER 1 2007

Effective date of dissolution if applicable: DECEMBER 31 2007
(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.

EFFECTIVE DATE
12-31-07

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

N/A

(voting group)

Signature:

Manuel A. Disgdiert

(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)

MANUEL A. DISGDIERT

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

FILED
2007 DEC -6 PM 12:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Filing Fee: \$35