# F02000006291

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#### **COVER LETTER**

TO: Amendment S Division of Co				e	
SUBJECT: _Jefferson	-Pilot Corporation	,	ur	g↑ <u>\$</u> -	i n s k n lin sy grojus
		(Name of Corp	oration)		<b>-</b>
DOCUMENT NUM	BER: F02000006291			At the Manager	
The enclosed withdra	iwal application and f	ee are submitted	for filing.		
Please return all corre matter to the followin	spondence concerning g:	this			2 -
Marilyn Ondec	ker	<u>.</u> .	5. 3r × *		and the second seco
<del></del>		(Name of Pers	on)		<del></del>
c/o The Lincol	n National Life Insurance (	Company	a special	See See See See See	Y) La
<u></u>		(Firm/Compar			
1300 South Cl	inton Street	- ·	ge yez e i.e	<u> </u>	<u></u>
		(Address)			
Fort Wayne, In		<u> Marrier (M. 4. 4. 4. 4</u>		<u> </u>	<u> </u>
	(C	ity/State and Zij	p code)		
For further information	on concerning this mat	er, please call:			
Marilyn Ondecker		at (	455-6516		
(Name	of Person)		ea Code & Dayti	me Telephone Num	lber)

#### STREET ADDRESS:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

### MAILING ADDRESS:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## APPLICATION BY FOREIGN CORPORATION FOR WITHDRAWAL OF AUTHORITY TO TRANSACT BUSINESS OR CONDUCT AFFAIRS IN FLORIDA

	Jetterson-Phot Corporation	<u> </u>	<u> </u>		<i>&gt;∪.</i>	$\subseteq$	
		(Name of Corporation	on)			بن سے	
					至於	=	
					ASE.		
	F02000006291	<u> </u>			SER	£	ł
	(D	ocument Number of Corporati	on (if known)		Û,C		П
					T) (	<u>-</u>	
					0	**	
	North Carolina	· <del></del>			器台	N3	
		(Incorporated Under La	ws of)		>		
			-				
	rporation is no longer transact			State of F	lorida a	nd he	eby
volunta	rily surrenders its authority to	transact business or condu	ct affairs in Florida.				
					-		
	orporation revokes the authori						
appoint	ts the Department of State as its	s agent for service of proce	ess based on a cause	of action	arising	during	the
	was authorized to transact busin				_	_	•
The fol	lowing is a current mailing add	lress for the corporation:			•		
	Mike Wilkins, c/o The Lincoln I			Street,		_	
		(Mailing Address)					
	Want Manual Tradition of COOO					* *	
	Fort Wayne, Indiana, 46802	700 10	***	· ·	<u> </u>	<u>.</u> `	***
		(City/ State /Zip)					
The con	poration agrees to notify the D	epartment of State in the f	uture of any change	in its mai	ling add	ress.	
					-		
	( Jett -					,	
	(Signature of a director, president or other	and the bands of a	6-04	6-06			_
	receiver of other court appointed fiduci	iary, by that fiduciary)		(Date)			
	**						
	Dennis R. Glass	y sawa <u>a</u> ga ≕	-President		÷		
	(Typed or printed name of perso	on signing)	(Title	of person sig	ming)		<b>-</b> · ·

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