

F95000004260

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

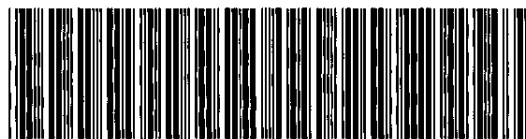
(Business Entity Name)

(Document Number)

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09/13/07--01002--007 \*\*35.00

FILED  
07 SEP 13 AM 11:00  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

CF 35.00

File 121

TS  
Loy/1/16  
DMS



JENNIFER L. DUFFY  
PARALEGAL

175 Berkeley Street, 07A  
Boston, MA 02117  
Telephone: (617) 357-9500 x 41706  
Fax: (617) 574-5830

September 10, 2007

**VIA TWO DAY UPS MAIL**

Florida Secretary of State  
Divisions of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

Re: **Liberty Mutual Managed Care, Inc. Conversion to  
Liberty Mutual Managed Care LLC**

Dear Sir/Madam:

Liberty Mutual Managed Care, Inc., a Massachusetts corporation (the "Company"), is currently qualified to business in your state as a foreign corporation.

Effective January 1, 2007, the Company converted from a Massachusetts corporation to a limited liability company. The name will be the same, with the exception of the ending designating as an LLC.

It is my understanding that in order to effectuate the conversion in the state of Florida we must simultaneously register the LLC and withdraw the corporation. Below please find the following documents in order for the LLC to be qualified to do business in your state as a foreign LLC.

1. Application for Withdrawal with \$35.00 filing fee;
2. Application by Foreign LLC to Transact Business with \$100.00 filing fee;
3. Certified copy of Massachusetts Articles of Entity Conversion;
4. Massachusetts Certificate of Good Standing for LLC; and
5. Name Consent Form.

**In order to ensure that the corporation is not withdrawn before the LLC has been approved for business in Florida, please register the LLC first, and then withdraw the corporation. If there is a problem with either filing please notify me immediately.**

Florida Secretary of State  
Divisions of Corporations  
Liberty Mutual Managed Care Conversion  
Page 2

If you have any questions or require additional information, please contact me via the information above. Thank you for your time.

Sincerely,

A handwritten signature in black ink, appearing to read "Jennifer L. Duffy". The signature is fluid and cursive, with a large initial "J" and "D".

Jennifer L. Duffy  
Enclosures.

Cc: Helen O'Rourke, Esq. (w/out enc.)  
James R. Pugh, Esq. (w/out enc.)  
Lynn Rogato (w/out enc.)

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Liberty Mutual Managed Care, Inc.  
(Name of Corporation)

**DOCUMENT NUMBER:** F95000004260

The enclosed **withdrawal application** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Jennifer L. Duffy  
(Name of Person)

Liberty Mutual Insurance Company  
(Firm/Company)

175 Berkeley Street, MS 07A  
(Address)

Boston, MA 02117  
(City/State and Zip code)

For further information concerning this matter, please call:

Jennifer L. Duffy at ( 617 ) 357-9500 x 41706  
(Name of Person) (Area Code & Daytime Telephone Number)

**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

**APPLICATION BY FOREIGN CORPORATION FOR WITHDRAWAL OF  
AUTHORITY TO TRANSMACT BUSINESS OR CONDUCT AFFAIRS IN FLORIDA**

Liberty Mutual Managed Care, Inc.

(Name of Corporation)

F95000004260

(Document Number of Corporation (if known))

Massachusetts

(Incorporated Under Laws of)

**FILED**  
**07 SEP 13 AM 11:00**  
**SECRETARY OF STATE**  
**TALLAHASSEE FLORIDA**

This corporation is no longer transacting business or conducting affairs within the State of Florida and hereby voluntarily surrenders its authority to transact business or conduct affairs in Florida.

This corporation revokes the authority of its registered agent in Florida to accept service on its behalf and appoints the Department of State as its agent for service of process based on a cause of action arising during the time it was authorized to transact business or conduct affairs in Florida.

The following is a current mailing address for the corporation:

175 Berkeley Street

(Mailing Address)

Boston, MA 02117

(City/ State /Zip)

The corporation agrees to notify the Department of State in the future of any change in its mailing address.



(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)

September 10, 2007

(Date)

James R. Pugh

(Typed or printed name of person signing)

Assistant Secretary

(Title of person signing)

**FILING FEE \$35**