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TRANSMITTAL LETTER

| TO: Amendment Section Division of Corporations |
|--|
| SUBJECT: Mecril Insurance Group, Inc. (Name of Corporation) |
| DOCUMENT NUMBER: 352881 |
| The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing |
| Please return all correspondence concerning this matter to the following: |
| Jon Blake Merrill (Name of Person) |
| Merrill Insurance Group Inc (Name of Firm/Company) |
| 1530 South Bay Street (Address) |
| Eustis FL 32726-5555 (City/State and Zip Code) |
| For further information concerning this matter, please call: |
| (Name of Person) at (352) 580-5200 (Area Code & Daytime Telephone Number) |
| Enclosed is a check for \$35.00 made payable to the Florida Department of State. |
| Mailing Address:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 63272661 Executive Center CircleTallahassee, FL 32314Tallahassee, FL 32301 |

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

| | Jan Blake Merrill, hereby resign as COO (Title) |
|---|--|
| | Merrill Insurance (Group, Inc. (Name of Corporation) |
| | 352881 , a corporation organized under the laws of the State of (Document Number, if known) |
| | Florida |
| | |
| | (Signature of resigning officer/director) |
| | |
| | FILING FEE IS \$35.00 |
| 1 | Make checks payable to Florida Department of State and mail to: |
| | 352881 , a corporation organized under the laws of the State of (Document Number, if known) Florida Blake Merrill 04/26/2018 (Signature of resigning officer/director) FILING FEE IS \$35.00 |

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