802320

| (Re | equestor's Name) | |
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| (Ad | ldress) | |
| (Ad | ldress) | |
| (Cil | ty/State/Zip/Phon | e #) ' |
| PICK-UP | WAIT | MAIL |
| (Bu | siness Entity Nar | me) |
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SECKETARY OF STATE
DIVISION OF CORPORATIONS

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COVER LETTER

| TO: Amendment Section Division of Corporations |
|---|
| SUBJECT: LIBERTY INSURANCE UNDERWRITERS INC. |
| (Name of Corporation) |
| DOCUMENT NUMBER: 802320 |
| The enclosed withdrawal application and fee are submitted for filing. |
| Please return all correspondence concerning this matter to the following: |
| BERNIE M. SCHILLING (MS 07A) |
| (Name of Person) |
| LIBERTY MUTUAL GROUP INC. |
| (Firm/Company) |
| 175 BERKELEY STREET |
| (Address) |
| BOSTON, MA 02116 |
| (City/State and Zip code) |
| For further information concerning this matter, please call: |
| BERNIE M. SCHILLING at (617) 654-3095 |
| (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 TRANSACT BUSINESS OR CONDUCT AFFAIRS IN FLORIDA

| LIBERTY INSURANCE UNDERWRITE | |
|--|--|
| (Name of Corporatio | |
| 802320 | on (if known) |
| (Document Number of Corporati | on (if known) |
| | ws of) |
| NEW YORK | |
| (Incorporated Under Lav | ws of) |
| This corporation is no longer transacting business or conducting voluntarily surrenders its authority to transact business or conducting to transacting business or conducting to the business of the business of transacting business or conducting | - |
| This corporation revokes the authority of its registered agent appoints the Department of State as its agent for service of procedume it was authorized to transact business or conduct affairs in I | ess based on a cause of action arising during th |
| The following is a current mailing address for the corporation: | |
| 175 BERKELEY STREET | |
| (Mailing Address) | |
| BOSTON, MA 02116 | |
| (City/ State /Zip) | |
| The corporation agrees to notify the Department of State in the f | uture of any change in its mailing address. |
| Sam Klingt | February 9, 2011 |
| (Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary) | (Date) |
| James R. Pugh | Assistant Secretary |
| (Typed or printed name of person signing) | (Title of person signing) |

FILING FEE \$35