

# 823356

_____ Printed Name	
_____ Address	
Jefferson Pilot Financial One Granite Place PO Box 515 Concord, NH 03302-0515 E-197 2/98	_____ Phone #
City/State	Office Use Only

## CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. (603) 224-7741 (Corporation Name) 400002798324--2 (Document #)  
-03/08/99--01136--018  
\*\*\*\*\*35.00 \*\*\*\*\*35.00
2. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)
3. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)
4. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)

- ☐ Walk in ☐ Pick up time \_\_\_\_\_ ☐ Certified Copy  
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

*Spoke to Judy  
3-11-99 about  
correct State  
PMS*

*With  
3-11-99  
PMS*

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

99 MAR - 8 PM 2:01

**FILED**

Examiner's Initials

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

Chubb Sovereign Life Insurance Company  
(Name of Corporation)

California  
(Incorporated Under Laws Of)

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.

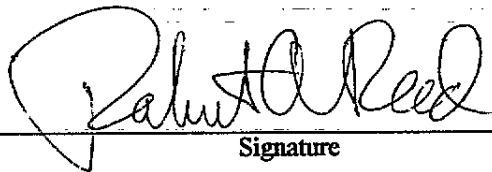
The following is a current mailing address to which the Department of State may mail a copy of any process against this corporation that may be served on the Department.

One Granite Place  
(Mailing Address)

Concord, New Hampshire 03301  
(City/ State /Zip)

**FILED**  
99 MAR -8 PM 2:01  
DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

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



Signature

Secretary  
Title

Robert A. Reed

Typed or printed name

2/19/99  
Date