827795

(Requestor's Name)				
dress)				
(Address)				
(City/State/Zip/Phone #)				
☐ WAIT	MAIL			
(Business Entity Name)				
(Document Number)				
_ Certificates	of Status			
Special Instructions to Filing Officer:				
	dress) dress) y/State/Zip/Phone WAIT siness Entity Nan cument Number) Certificates			

Office Use Only



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SUFFICIENCY OF FILMS

SOUTH WHIT OF

100T 1 1 2013 T. CARTER



ION SERVICE COMPANY					
ACCOUNT NO.	:	1200000001	95		
REFERENCE	:	842556	7907958		
AUTHORIZATION	:		V.		
COST LIMIT	:	\$ 35.00	I come	,	_
ORDER DATE : October 10, 2013					
ORDER TIME : 5:06 PM					
ORDER NO. : 842556-005					
CUSTOMER NO: 7907958					
				- -	
FOREIGN F	ILI	<u>NGS</u>			
NAME: WESTERN NATION INSURANCE COM					
XX CORPORATE LIMITED PARTNERSHIP LIMITED LIABILITY COMPANY	Y				
XXXX WITHDRAWAL/CANCELLATION				13 OCT	SECRE TALL 7
PLEASE RETURN THE FOLLOWING AS	PR	OOF OF FILE	NG:	<u></u>	13 53 13 23
CERTIFIED COPY XX PLAIN STAMPED COPY				1 H C	

CONTACT PERSON: Susie Knight - EXT# 52956

CERTIFICATE OF STATUS

EXAMINER:



13 OCT | | PM | 2: 50

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

Western National Life Insurance Company

	(Name of Corporation)	
	827795	
	(Document Number of Corporation	ı (if known)
	Texas	
	(Incorporated Under Laws	of)
	reporation is no longer transacting business or conducting trily surrenders its authority to transact business or conducting	•
appoint	orporation revokes the authority of its registered agent in is the Department of State as its agent for service of proce it was authorized to transact business or conduct affairs i	ess based on a cause of action arising during
The foll	lowing is a current mailing address for the corporation:	
	2919 Allen Parkway, L4-01	
	(Mailing Address)	
	Houston, TX 77019	
	(City/ State /Zip)	
The corp	poration agrees to notify the Department of State in the ful	
C	(Signature of a director, president or officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)	10-12-2013 (Date)
	Julie Cotton Hearne	Vice President
-	(Typed or printed name of person signing)	(Title of person signing)

FILING FEE \$35