834453

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COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: MetLife Investors USA Insurance Company	
(Name of Corporation)	
DOCUMENT NUMBER: 834453 ·	
The enclosed withdrawal application and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
ROSSEII WITTEN (Name of Person)	
Netropoliton Life Tourance company) (Firm/Company)	
1095 Avence of the Americas (Address)	
NEW York, My 100360 (City/State and Zip code)	
For further information concerning this matter, please call:	
Name of Person) at (3\3) 575-2253 (Area Code & Daytime Telephone Number)	
Enclosed is a check for the amount:	
\$35 Filing Fee \$\bigcup \\$43.75 Filing Fee & \$\bigcup \\$43.75 Filing Fee & \$\bigcup \\$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is Enclosed) \$\bigcup \\$35 Filing Fee & \$\bigcup \\$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)	
MAILING ADDRESS:STREET ADDRESS:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 63272661 Executive Center CircleTallahassee, FL.32314Tallahassee, FL. 32301	

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

MetLife Investors USA Insurance Company		3 7
(Name of Corporation)	12.4.1. 42.1 42.1	Same same
		Tame (Trip)
824453	22) 45 =	
(Document Number of Corporation (if known)	-i.e	cu ro
		4
Delaware		
(Incorporated Under Laws of)		_
This corporation is no longer transacting business or conducting affairs within the State 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 ser appoints the Department of State as its agent for service of process based on a cause of the time it was authorized to transact business or conduct affairs in Florida.	vice on its l	behalf and
The following is a current mailing address for the corporation:		
1095 Avenue of the Americas (Mailing Address)		_
New York, NY 10036		
(City/ State /Zip)		_
The corporation agrees to notify the Department of State in the future of any change in it (Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)	s mailing ad	ldress.
Type Tayolds (Typed or printed name of person signing) (Title of person signing)	rson signing)	

FILING FEE \$35