844269



(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	

Office Use Only



800008660718

11/04/02--01017--016 **35.00

DIVISION OF COSPICIATION

C. Coulliette NOV 0 4 2002

CT CORPORATION

November 4, 2002

Secretary of State, Florida 409 East Gaines Street N/A Tallahassee FL 32399

Re: Order #: 5714396 SO Customer Reference 1:

Customer Reference 2:

Dear Secretary of State, Florida:

Please file the attached:

The Paul Revere Protective Life Insurance Company (DE) Withdrawal Florida

Enclosed please find a check for the requisite fees. Please return evidence of filing(s) to my attention.

If for any reason the enclosed cannot be filed upon receipt, please contact me immediately at (850) 222-1092. Thank you very much for your help.

Sincerely,

Katrina Forsman
Fulfillment Specialist
Katrina_Forsman@cch-lis.com

660 East Jefferson Street Tallahassee, FL 32301 Tel. 850 222 1092 Fax 850 222 7615

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

The Paul Revere Protective Life Insurance Company

(Name of Corporation)				
Delaware (Incorporated Under Law	s Of)			<u></u>
This corporation is no longer transacting business or cond and hereby voluntarily surrenders its authority to transact h	_			
This corporation revokes the authority of its registered a behalf and appoints the Department of State as its agent for action arising during the time it was authorized to transact	or service of process	based on a ca	use of	
The following is a current mailing address for the corporat	tion:_			
18 Chestnut Street	<u>:-</u>	SEUR	F1L 2002 NOV -4	
(Mailing Address)		HAA	V	
Worcester, Massachusetts 01608	<u>:</u> =	RY OF SEE, F	-4 PM	
(City/ State /Zip)		STATE LORIDA	1:28	
The corporation agrees to notify the Department of State is address.	in the future of any cl	nange in its m	ailing	
Mars	Vice President,	Corporate	Secreta	ry
Signature of the chairman or vice chairman of the board, president, or any officer, or if the corporation is in the hands of a receiver, trustee, or other court-appointed fiduciary, by that fiduciary	Title and large.	Assistant	General	Counse1
Susan N. Roth	10/25/02			
Typed or printed name	Date		- 43	-