847119

| (Requestor's Name) | | | | | |
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| (Address) | | | | | |
| (Address) | | | | | |
| (City/State/Zip/Phone #) | | | | | |
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| (Business Entity Name) | | | | | |
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TRANSMITTAL LETTER

| TO: Ar | nendment Section | | | | | | |
|--|---|-----------------------|------------|---------------------------------|---|--|--|
| Di | vision of Corporations | | | | | | |
| SUBJEC' | T: The Sumitor | no Marine and Fire l | Insura nce | e Company, Limited | | | |
| | | (Name of corpo | ration) | | | | |
| DOCUM | ENT NUMBER: | 847119 | | | | | |
| The enclo | sed withdrawal applica | ation and fee are sul | bmitted f | or filing. | | | |
| | urn all correspondence c he following: | oncerning this | | | | | |
| | | William J. | Curtis, J | r. | | | |
| | | (Name o | f Person |) | | | |
| Mitsui Sumitomo Marine Management (U.S.A.), Inc. | | | | | | | |
| | (Firm/Company) | | | | | | |
| | 18 | 5 Independence Boul | levard, P. | O. Box 4602 | | | |
| - | | | dress) | | | | |
| | | Warren, | NJ 0 7059 |) | | | |
| | | (City/State a | ınd Zip c | ode) | | | |
| For furthe | r information concerning | g this matter, please | call: | | | | |
| | William J. Curtis, Jr. | at (| 800 |) 388-1802 ext.8906 | | | |
| | (Name of Person) | | (Area | Code & Daytime Telephone Number |) | | |
| | STREET ADDRE | <u>ss:</u> | | MAILING ADDRESS: | | | |
| | Amendment Section | | | Amendment Section | | | |
| | Division of Corpora | ations | | Division of Corporations | | | |
| | 409 E. Gaines St | | | P.O. Box 6327 | | | |

Tallahassee, FL. 32314

Tallahassee, FL. 32399



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

June 29, 2004

WILLIAM J. CURTIS, JR. MITSUI SUMITOMO MARINE MANAGEMENT (USA) P. O. BOX 4602 WARREN, NJ 07059

SUBJECT: THE SUMITOMO MARINE AND FIRE INSURANCE COMPANY,

LIMITED

Ref. Number: 847119

We have received your document for THE SUMITOMO MARINE AND FIRE INSURANCE COMPANY, LIMITED and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The attached form must be completed in order to file the document.

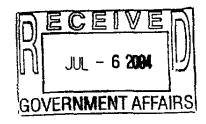
Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6905.

Thelma Lewis
Document Specialist Supervisor

Letter Number: 404A00042476

Pls. Find Completed Form ENGRED.
Bill



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

| The Sumitomo Marine and Fire Insurance Company, Limited | |
|---|---------------------------------------|
| (Name of Corporation) | |
| | |
| the State of New York | · · · · · · · · · · · · · · · · · · · |
| (Incorporated Under Laws Of) | |
| | · , :' |
| | |
| This corporation is no longer transacting business or conducting affairs within the and hereby voluntarily surrenders its authority to transact business or conduct affair | |
| and hereby voluntarity surrenders its authority to transact ousiness of conduct arian | S III FIOLIUA. |
| This corporation revokes the authority of its registered agent in Florida to accepte behalf and appoints the Department of State as its agent for service of process baraction arising during the time it was authorized to transact business or conduct affair | sed on a cause of |
| The following is a current mailing address to which the Department of State may reprocess against this corporation that may be served on the Department. | nail a copy of any |
| | |
| | |
| | |
| 15 Indonesiana Paulovand D.O. Boy /600 | |
| | |
| (Manual Addition) | |
| | |
| | |
| Warren, New Jersey 07059 | |
| (City/ State /Zip) | |
| | |
| | |
| The corporation agrees to notify the Department of State in the future of any charaddress. | ige in its mailing |
| | |
| | G |
| VP & Assistant | Secretary |
| Stinature of the chairman or vice chairman of the board, Title president, or any officer. | |
| Brian J. Reed 7/16/04 | |
| Typed or printed name Date | |