853656

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COVER LETTER

TO: Amendment Section Division of Corporations SUBJECT: LINCOLN NATIONAL INSURANCE ASSOCIATES, INC (Name of Corporation) DOCUMENT NUMBER: 853656 The enclosed withdrawal application and fee are submitted for filing. Please return all correspondence concerning this matter to the following: W. STEVEN HOLLINGSWORTH (Name of Person) LFA, LIMITED LIABILITY COMPANY (Firm/Company) 1300 S. CLINTON STREET (1H-53) (Address) FORT WAYNE, IN 46802 (City/State and Zip code) For further information concerning this matter, please call: W. STEVEN HOLLINGSWORTH (Area Code & Daytime Telephone Number) (Name of Person)

STREET ADDRESS:

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

MAILING ADDRESS:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

LINCOLN NATIONAL INSURANCE AS	SSOCIATES, INC
(Name of Corpor	ation)
	As of
853656	E PE
(Document Number of Corpo	Laws of)
CONNECTICUT	FOF
(Incorporated Under	Laws of) CRUCA CRUCA
This corporation is no longer transacting business or conductivoluntarily surrenders its authority to transact business or conductivoluntarily surrenders.	
This corporation revokes the authority of its registered age appoints the Department of State as its agent for service of pr time it was authorized to transact business or conduct affairs it	ocess based on a cause of action arising during the
The following is a current mailing address for the corporation	n:
1300 South Clinton Street (7C00)	
(Mailing Addre	ess)
Fort Wayne, IN 46802	
(City/ State /Zi	(p)
The corporation agrees to notify the Department of State in the State	ne future of any change in its mailing address.
James A. Badiac	Assistant Vice President
(Typed or printed name of person signing)	(Title of person signing)

FILING FEE \$35