

(Requestor's Name)	
(Address)	
(Address)	
(City/S	itate/Zip/Phone #)
PICK-UP	
(Business Entity Name)	
(Document Number)	
Certified Copies	Certificates of Status
Special Instructions to Filing Officer:	
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Office Use Only



11/16/11--01020--014 **35.00

Withdrawel





11/16/11

November 16, 2011

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C T Corporation System 1203 Governors Square Blvd. Suite 101 Tallahassee FL 32301-2960

Re: Order #: 70320317 WO Customer Reference 1: 201119589 Customer Reference 2: None Given

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Dear Tallahassee Fulfillment Team 1:

Please file the attached:

Cal Fed Insurance Agency, Inc. (CA) Withdrawal Florida

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

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

Sincerely,

Hannah Jimenez Fulfillment Specialist - Contractor hannah.jimenez@wolterskluwer.com

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COVER LETTER

TO: Amendment Section **Division of Corporations**

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SUBJECT: Cal Fed Insurance Agency, Inc.

(Name of Corporation)

DOCUMENT NUMBER: 857805

The enclosed withdrawal application and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

(Name of Person)

(Firm/Company)

(Address)

(City/State and Zip code)

For further information concerning this matter, please call:

(Name of Person)

_ at (_____

(Area Code & Daytime Telephone Number)

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

FILED

TALLAHASSEE, FLORID 4

APPLICATION BY FOREIGN CORPORATION FOR WITHING AN AFROF 09 AUTHORITY TO TRANSACT BUSINESS OR CONDUCT AFFAIRS IN FLORIDA SECRETARY OF STATE

Cal Fed Insurance Agency, Inc.

(Name of Corporation)

857805

(Document Number of Corporation (if known)

California

(Incorporated Under Laws of)

This corporation is no longer transacting business or conducting affairs within the State of Florida and hereby 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 service on its behalf and appoints the Department of State as its agent for service of process based on a cause of action arising during the time it was authorized to transact business or conduct affairs in Florida.

The following is a current mailing address for the corporation:

1000 Technology Drive, MS 140

(Mailing Address)

O'Fallon, MO 63368

(City/ State /Zip)

The corporation agrees to notify the Department of State in the future of any change in its mailing address.

artirector, president or other officer - if in the hands of a ature of receiver of other court appointed fiduciary, by that fiduciary)

2011

Henry B. Prozorowski (Typed or printed name of person signing) Vice President (Title of person signing)

FILING FEE \$35