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Florida Department of State

Division of Corporations

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To:
     Division of Corporations
     Fax Number      :  (850)205-0380

From:
     Account Name    :  CORPORATION SERVICE COMPANY
     Account Number  :  I20000000195
     Phone           :  (850)521-1000
     Fax Number      :  (850)558-1575
```

Trey #2940

06 NOV -3 PM 3:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
FILED

RECEIVED
06 NOV -3 AM 8:00
DIVISION OF CORPORATION

DISSOLUTION OR WITHDRAWAL

GALLAGHER HEALTHCARE INSURANCE SERVICES, INC.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	$35.00

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ft Wish ck
11-3-06

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

Gallagher Healthcare Insurance Services, Inc.
_____
(Name of Corporation)

FO 100000 4604
_____
(Document Number of Corporation (if known)

Texas
_____
(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:

Two Pierce Place, Itasca, IL 60143
_____
(Mailing Address)

_____
(City/ State /Zip)

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

Christine D. Greb
_____
(Signature of a director, president or other officer - if in the hands of a
receiver or other court appointed fiduciary, by that fiduciary)

10-18-06
_____
(Date)

Christine D. Greb
_____
(Typed or printed name of person signing)

Assistant Secretary
_____
(Title of person signing)

FILING FEE $35

ITASCA