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Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name

: C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone

: (850)222-1092

Fax Number

: (850)878-5368

## DISSOLUTION OR WITHDRAWAL **ENCOMPASS INSURANCE COMPANY OF AMERICA**

Certificate of Status	0
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Page Count	03
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## **COVER LETTER**

TO:	Amendment Section Division of Corporations			
SUBJ	ECT: Encompass Insurance Company of A		<u> </u>	
		(Name of Corpo	ration)	
DOC	UMENT NUMBER: F02000003929		· · · · · · · · · · · · · · · · · · ·	
The e	nclosed withdrawal application and	fee are submitted	for filing.	
	e return all correspondence concerning r to the following:	; this	•	
	Catherine Lancaster			
		(Name of Perso	n)	
	Allstate Insurance Company			
(Firm/Company)				
2775 Senders Road, Suite A2W				
(Address)				
	Northbrook, IL 60062-6127			
	((	ity/State and Zip	code)	
For fi	urther information concerning this mat	ter, please call:	· ·	
Cathe	rine Loncaster	at ( 847	402-5402	
Enclo	(Name of Person) sed is a check for the amount:	(Area	a Code & Daytime Telephone Number)	
<b>\$</b> 3	5 Filing Fee \$43,75 Filing Fee & Certificate of Status	\$43.75 Filing l Certified Copy (Additional co Enclosed)	Certificate of Status & Certified	
	MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL.32314		STREET ADDRESS: Amendment Section. Division of Corporations 2661 Executive Center Circle Tallahassee, FL. 32301	

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

i	Encompass Insurance Company of America	
•	(Name of Corporation)	
	F02000003929	
•	(Document Number of Corporation (	f known)
	•	f known)
	Illinois	ूर्य १
	(Incorporated Under Laws o	<del>)</del>
		•
voluntaril This corp	coration is no longer transacting business or conducting at ly surrenders its authority to transact business or conduct a coration revokes the authority of its registered agent in the Department of State as its agent for service of process	ffairs in Florida. Florida to accept service on its behalf and is based on a cause of action arising during
the time i	t was authorized to transact business or conduct affairs in	Florida.
The follo	wing is a current mailing address for the corporation:	
	3075 Sanders Road, Suite HI A	
•	(Mailing Address)	
	Northbrook, IL 60062-7127	
•	(City/ State /Zip)	
The corpo	oration agrees to notify the Department of State in the fut.	re of any change in its mailing address.
(	Hanriche M Hous	August 5, 2013
হৈ	printure of a diffector, president or other collicer - If in the hands of a elever or other court appointed fiducially, by that fiduciary)	(Date)
3-	ennifer M. Hager	Assistant Secretary
_	(Typed or printed name of person signing)	(This of person signing)
	FILING FEE \$35	

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