(Re	equestor's Name)	
(Ad	ddress)	
(Ac	ddress)	
(C	ity/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(B	usiness Entity Na	me)
(D	ocument Number	)
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## **COVER LETTER**

	ECT: Newstead Insurance Company (Name of Corporation)
	(waine or Corporation)
oct	JMENT NUMBER: F05000003982
he en	closed withdrawal application and fee are submitted for filing.
	return all correspondence concerning this to the following:
	Nancy Self
	(Name of Person)
	QBE North America
	(Firm/Company)
	5801 Tennyson Parkway, Suite 600
	(Address)
	Plano, TX 75024
	(City/State and Zip code)
For fu	rther information concerning this matter, please call:
For fur Nancy S	

### 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

Newstead Insurance Company	
(Name of Corporation)	
F05000003982  (Document Number of Corporation (if known)	
. (Document (Validor of Corporation (it known)	
Delaware	
(Incorporated Under Laws of)	
This corporation is no longer transacting business or conducting affairs within the State of Florida and 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 behappoints the Department of State as its agent for service of process based on a cause of action arising dur time it was authorized to transact business or conduct affairs in Florida.  The following is a current mailing address for the corporation:	alf and
5801 Tennyson Parkway, Suite 600	_
(Mailing Address)	i o
Plano, TX 75024 (City/ State /Zip)	
(City/ State /Zip)	
The corporation agrees to notify the Department of State in the future of any change in its mailing address	
(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)  (Date)	_
Nancy Self Asst Secretary	

**FILING FEE \$35**