

FD00000004041

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Withdrawal

'AUG 13 2014

T. CARTER

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Klein Insurance Services, Inc.
(Name of Corporation)

DOCUMENT NUMBER: F06000004041

The enclosed **withdrawal application** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Hailey Overby

(Name of Person)

Kennedy Licensing Service Inc.

(Firm/Company)

4144 N Central Expressway Ste 800

(Address)

Dallas, TX 75204

(City/State and Zip code)

For further information concerning this matter, please call:

Hailey Overby

(Name of Person)

at (214) 855-0737

(Area Code & Daytime Telephone Number)

Enclosed is a check for the amount:

☐ \$35 Filing Fee ☒ \$43.75 Filing Fee & Certificate of Status ☐ \$43.75 Filing Fee & Certified Copy (Additional copy is Enclosed) ☐ \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)

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

KENNEDY LICENSING SERVICE, INC
From the Desk of Hailey Overby

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

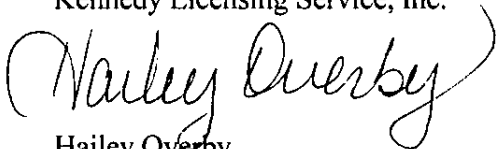
RE: Klein Insurance Services, Inc.-F06000004041

Enclosed are the necessary application(s) to withdrawal the above referenced foreign entity.

Please process their application as soon as possible and forward the processed duplicate copy (if applicable) and Certificate of Withdrawal to my attention.

If you have any questions or require additional information, please contact me at 214-855-0737 or via email hoverby@kennedylicensing.com. Your cooperation and prompt attention to this request is greatly appreciated.

Sincerely,
Kennedy Licensing Service, Inc.



Hailey Overby
Treasurer & Initial Lic. Specialist
Email: hoverby@kennedylicensing.com

Enc: Application to Cancel, \$43.75 fee

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

Klein Insurance Services Inc.

(Name of Corporation)

F06000004041

(Document Number of Corporation (if known))

NJ

(Incorporated Under Laws of)

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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:

1 Claridge Dr Apt 916

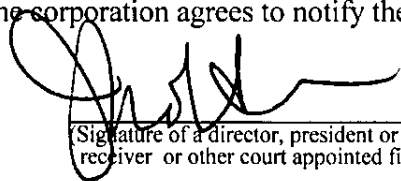
(Mailing Address)

Verona, NJ 07044

(City/ State /Zip)

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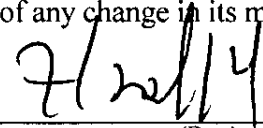
The corporation agrees to notify the Department of State in the future of any change in its mailing address.



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

J. Scott Klein,

(Typed or printed name of person signing)



(Date)

President

(Title of person signing)

FILING FEE \$35