

F06000004222

Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850) 617-6380

From: Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850) 205-8842
Fax Number : (850) 878-5368

**DISSOLUTION OR WITHDRAWAL
AMERIPRISE INSURANCE COMPANY**

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

RECEIVED
16 JUN 14 PM 3:55
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FILED
16 JUN 14 PM 3:56
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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Withdrawal

JUN 15 2016

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Ameriprise Insurance Company

(Name of Corporation)

DOCUMENT NUMBER: F06000004222 -- Florida NAIC for domestic corporation #12504

The enclosed withdrawal application and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Shelly A. Smith

(Name of Person)

Ameriprise Insurance Company

(Firm/Company)

1098 Ameriprise Financial Center, Mail Code H29-1098

(Address)

Minneapolis, MN 55474

(City/State and Zip code)

For further information concerning this matter, please call:

Shelly A. Smith

at (612) 671-2733

(Name of Person)

(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

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

Ameriprise Insurance Company

(Name of Corporation)

F06000004222 -- Florida NAIC for domestic corporation #12504

(Document Number of Corporation (if known))

Wisconsin

(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:

1098 Ameriprise Financial Center, Mail Code H29-1098

(Mailing Address)

Minneapolis, MN 55474

(City/ State /Zip)

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TALLAHASSEE, FLORIDA

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)

06/14/2016

(Date)

Thomas R. Moore

(Typed or printed name of person signing)

Secretary

(Title of person signing)

FILING FEE \$35