F06000004873

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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SECRETARY OF STATE
ALLAHASSEE, FLORIDA

withdrawal Sp 12/12



FITNESS AND WELLNESS INSURANCE AGENCY

November 7, 2007

Florida Department of State Division of Corporations Corporate Filings P.O. Box 6327 Tallahassee, FL 32314

To Florida Department of State Division of Corporations Corporate Filings:

Fitness and Wellness will not be renewing their corporate registration for the next period. The agency has been sold and we will no longer be selling insurance in your state. Please update your records to reflect this change. Please forward any future documentation to Kelly Hanly at the address below. Please see registration/FEIN number below. Registered agent information is listed on the right.

Registration / FEIN: F06000004873

Registered Agent: Incorp Services, Inc. 18450 NE 2nd Ave., Miami, FL 33179

Sincerely,

Kelly Hanly - Licensing Coordinator Fitness and Wellness Insurance Agency 380 Stevens Ave #206 Solana Beach, CA 92075 858-509-7811

74 May Africating



FLORIDA DEPARTMENT OF STATE Division of Corporations

November 15, 2007

Kelly Hanly Fitness and Wellness Insurance Agency 380 Stevens Ave., Ste. 206 Solana Beach, CA 92075

SUBJECT: FITNESS AND WELLNESS INSURANCE AGENCY, INC.

Ref. Number: F06000004873

A foreign corporation authorized to transact business or conduct its affairs in Florida may withdraw its authority by completing the enclosed withdrawal application and submitting the appropriate fee.

The fee to file articles of dissolution or a certificate of withdrawal is \$35. Certified copies are optional and are \$8.75 for the first 8 pages of the document, and \$1 for each additional page, not to exceed \$52.50.

Please return a copy of this letter along with your document to ensure proper handling.

If you have any questions concerning this matter, please either respond in writing or call (850) 245-6901.

Susan Payne Senior Section Administrator

Letter Number: 807A00066079



COVER LETTER

•
O: Amendment Section Division of Corporations
UBJECT: Fitness and Wellness Insurance (Name of Corporation)
(Name of Corporation)
OCUMENT NUMBER: <u>F0600004873</u>
The enclosed withdrawal application and fee are submitted for filing.
lease return all correspondence concerning this natter to the following:
(Name of Person)
(Name of Person)
Fitness and Wellness Insurance
(Firm/Company)
380 Stevens Ave, Suite # 206
(Address)
Solana Beach, CA. 92075. (City/State and Zip code)
(City/State and Zip code)
or further information concerning this matter, please call:
Ton Godbout at (800) 395 - 8075 x 141 (Name of Person) (Area Code & Daytime Telephone Number)
(Name of Person) (Area Code & Daytime Telephone Number)
MAILING ADDRESS. STDEET ADDRESS.
MAILING ADDRESS: STREET ADDRESS:

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

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

Fitness and Wellness Insurance	
(Name of Corporation) FOGO0004873 (Document Number of Corporation (if known)	<u>п</u> = п
California (Incorporated Under Laws of)	j
This corporation is no longer transacting business or conducting affairs within the State of Florida and h voluntarily surrenders its authority to transact business or conduct affairs in Florida.	ereby
This corporation revokes the authority of its registered agent in Florida to accept service on its behal appoints the Department of State as its agent for service of process based on a cause of action arising during it was authorized to transact business or conduct affairs in Florida.	
The following is a current mailing address for the corporation:	
380 Stevens Ave. Suite 206 (Mailing Address)	
Solana Beach, CA. 92075 (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)	_
Teffrey Frick (Typed or printed name of person signing) (Title of person signing)	

FILING FEE \$35