

FOLD DDDDD 6228

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

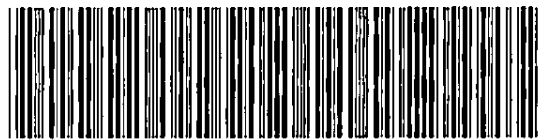
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2018 NOV -7 AM 9:27
STATE OF FLORIDA
TALLAHASSEE

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18 NOV -7 PM 1:39
TALLAHASSEE
STATE OF FLORIDA
DEPT. OF REVENUE

Withdrawal

NOV 08 2018
1 ALBRITTON

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195
REFERENCE : 474817 7358465
AUTHORIZATION : 
COST LIMIT : \$ 35.00

ORDER DATE : November 7, 2018
ORDER TIME : 1:19 PM
ORDER NO. : 474817-030
CUSTOMER NO: 7358465

FOREIGN FILINGS

NAME: DIVERSIFIED INSURANCE
SOLUTIONS, INC.

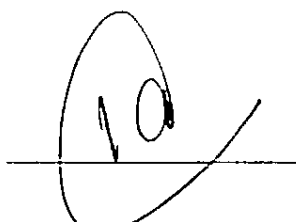
XX CORPORATE
 LIMITED PARTNERSHIP
 LIMITED LIABILITY COMPANY

XXXX WITHDRAWAL/CANCELLATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF STATUS

CONTACT PERSON: Emily Croft - EXT# 62925

EXAMINER: 

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

Diversified Insurance Solutions, Inc.

(Name of Corporation)

F06000006228

(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:

100 N. Corporate Drive, Ste 100

(Mailing Address)

Brookfield, WI 53045

(City/ State /Zip)

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2019 NOV -7 AM 9:27
SECRETARY OF STATE
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)

10/31/2018

(Date)

Karl Cumblad

(Typed or printed name of person signing)

CFO

(Title of person signing)

FILING FEE \$35