Fax Server 5/18/2012 2:38:21 PM PAGE 1/003 Fax Server Division of Corporations Fax Server Division of Corporations

Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H12000134653 3)))

W

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : CORPORATION SERVICE COMPANY

Account Number : I20000000195 Phone : (850)521-0821 Fax Number : (850)558-1515

DISSOLUTION OR WITHDRAWAL
WELLS FARGO INSURANCE SERVICES OF ILLINOIS, INC.

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

Help

PEPAR IMENTION SINIES SUITS NAVI 18 AM 8: 09

MAY 2 1 2012 C. MUSTAIN 5/18/2012 2:38:21 PM PAGE 2/003 Fax Server

COVER LETTER

	TO: Amendment Section Division of Corporations					
SUBJEC	T: Wells Fargo Insurance Services of Illinois, Inc.					
			Corporation)			
DOCUMENT NUMBER: F06000006732						
The encl	losed withdrawal ap	oplication and fee are subm	aitted for filing.			
	eturn all corresponde the following:	ence concerning this				
	Deidre Messeng	er				
		(Name of	Person)			
	Wells Fargo & C					
		(Firm/Cor	npany)			
800 Walnut Street, N0001-100						
(Address)						
Des Moines, IA 50309						
(City/State and Zip code)						
For furt	her information cond	cerning this matter, please c	all:			
Deidr	Deidre Messenger at (515) 557-8206 (Name of Person) (Area Code & Daytime Telephone Number)					
	(Name of Per	rson)	(Area Code & Daytime Telephone Number)			
٠	STREET AI Amendment Division of C	Section	MAILING ADDRESS: Amendment Section Division of Corporations			

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

(Name of Corporation)	AV		
	$=$ \subseteq \S ;	HA	
F06000006732		AY	-
(Document Number of Corporation (if known)			r
	يري البار	225	Į.
Illinois	FLO	ö	_
(Incorporated Under Laws of)		<u>-5</u>	
	a		
oration is no longer transacting business or conducting affairs within the Stat	e of Florida	and h	ere
y 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.

(Mailing Address)

The following is a current mailing address for the corporation:

150 N. Michigan Avenue, Suite 3900

Chicago, IL 60601 (City/ State /Zip)	
The corporation agrees to notify the Department of State in the future of State in the futu	re of any change in its mailing address. 3-1-1-1Z (Date)
Christine M. Ostermeier	Treasurer
(Typed or printed name of person signing)	(Title of person signing)