

F07000000958

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6380

From:

Account Name : CORPDIRECT AGENTS, INC.
Account Number : 110450000714
Phone : (850) 222-1173
Fax Number : (850) 224-1640

001668.162919

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12 MAR -7 AM 10:51
TALLAHASSEE, FLORIDA

**DISSOLUTION OR WITHDRAWAL
LM INSURANCE AGENCY, INC.**

Certificate of Status	0
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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: LM Insurance Agency, Inc.

(Name of Corporation)

DOCUMENT NUMBER: F07000000958

The enclosed withdrawal application and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Robert Ro

(Name of Person)

Lexicon Marketing

(Firm/Company)

6380 Wilshire Blvd., Suite 1400

(Address)

Los Angeles, CA 90048

(City/State and Zip code)

For further information concerning this matter, please call:

Robert Ro

(Name of Person)

at (323) 782-6465

(Area Code & Daytime Telephone Number)

MAILING ADDRESS:

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

STREET ADDRESS:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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**APPLICATION BY FOREIGN CORPORATION FOR WITHDRAWAL OF
AUTHORITY TO TRANSACT BUSINESS OR CONDUCT AFFAIRS IN FLORIDA**LM Insurance Agency, Inc.

(Name of Corporation)

F07000000958

(Document Number of Corporation (if known))

Delaware

(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:


6380 Wilshire Blvd., Suite 1400

(Mailing Address)

Los Angeles, CA 90048

(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)

2/16/12
(Date)

Robert Ro

(Typed or printed name of person signing)

Chief Financial Officer

(Title of person signing)

FILING FEE \$35

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