

FO7000003943

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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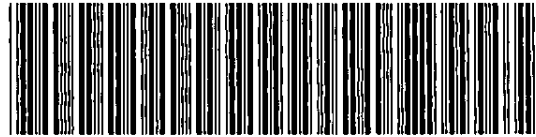
(Business Entity Name)

(Document Number)

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FILED
14 OCT -6 PM 4:26
SECRETARY OF STATE
CITY OF MASSACHUSETTS



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 241219 7408659

AUTHORIZATION :

COST LIMIT : \$ 35.00

ORDER DATE : August 1, 2014

ORDER TIME : 2:57 PM

ORDER NO. : 241219-165

CUSTOMER NO: 7408659

FOREIGN FILINGS

NAME: KELTER ALLIANT INSURANCE
SERVICES, INC.

XX___ CORPORATE
___ LIMITED PARTNERSHIP
___ LIMITED LIABILITY COMPANY

XXXX WITHDRAWAL/CANCELLATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

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XX___ PLAIN STAMPED COPY
___ CERTIFICATE OF STATUS

CONTACT PERSON: Courtney Williams - EXT# 62935

EXAMINER: _____

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14 OCT -6 PM 4:26
TALLAHASSEE, FL 32309
SECRETARY OF STATE

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

Kelter-Alliant Insurance Services, Inc.

(Name of Corporation)

F07000003943

(Document Number of Corporation (if known))

Michigan

(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:

c/o Legal Department, 701 B Street, 6th Floor

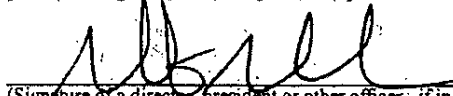
(Mailing Address)

San Diego, CA 92101

(City/State/Zip)

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SECRETARY
ALLIANT

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)

Kenneth A. Zak

(Typed or printed name of person signing)

9/18/14

(Date)

SVP, General Counsel & Secretary

(Title of person signing)

FILING FEE \$35