

F 0700000 6096

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

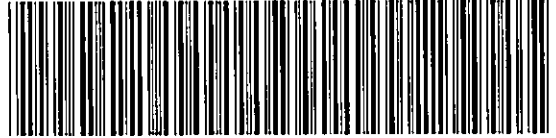
(Business Entity Name)

(Document Number)

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2023 MAR -1 AM 9:52

STATE OF FLORIDA  
TALLAHASSEE, FL

RECEIVED

2023 MAR -1 AM 11:19

REGISTRARS OFFICE  
STATE OF FLORIDA  
TALLAHASSEE, FLORIDA

3/2/2023

FILE 1ST

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

ACCOUNT NO. : I20000000195

REFERENCE : 437659 8331191

AUTHORIZATION :

COST LIMIT : \$ 35.00

ORDER DATE : February 6, 2023

ORDER TIME : 9:06 AM

ORDER NO. : 437659-130

CUSTOMER NO: 8331191

FOREIGN FILINGS

NAME: CRUMP LIFE INSURANCE SERVICES,  
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: Alexxis Weiland - EXT#

EXAMINER: \_\_\_\_\_

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

AM 9: 52  
STATE  
TALLAHASSEE, FL

Crump Life Insurance Services, Inc.

(Name of Corporation)

F07000006096

(Document Number of Corporation (if known))

Pennsylvania 12/13/2007

(Incorporated Under Laws of and date authorized to transact business/conduct its affairs)

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:

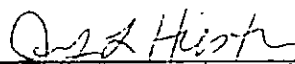
c/o Hasana Stanberry, Truist 214 N Tryon St

(Mailing Address)

Charlotte, NC 28202-1078

(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)

Jennifer Hiester

(Typed or printed name of person signing)

02/27/2023

(Date)

Secretary

(Title of person signing)

**FILING FEE \$35**