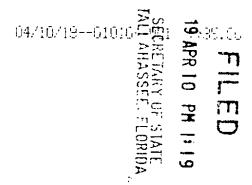
## F0800000 3224

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## COVER LETTER

TO:		idment Section	ŝ		
SUBJE		Lancet Indemnity		tion Group Inc.	
SUBJI	LCI:			Name of Corporation	)
DOCU	MEN	T NUMBER: F0	8000003224		
The en	closed	withdrawal appli	cation and fe	e are submitted for file	ing.
		all correspondence	concerning t	his	
	And	rew Carlton			
			<u> </u>	(Name of Person)	
	Ris	k Services LLC			
				(Firm/Company)	
	160	)5 Main Street,	Suite 800		
			· · · · · · · · · · · · · · · · · · ·	(Address)	
	Sai	rasota, FL 3423	6		
			(Cit	y/State and Zip code)	
For fur	ther in	formation concern	ing this matte	r, please call:	
Andre	ew Ca	arlton		941 37	73-1113
Enclose	ed is a	(Name of Person check for the amo	•		& Daytime Telephone Number)
<b>₹</b> 35	Filing	Fee \$43.75 Fi Certificat	ling Fee & e of Status	\$43.75 Filing Fee & Certified Copy (Additional copy is Enclosed)	\$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)
		MAILING ADI Amendment Sec			STREET ADDRESS: Amendment Section

Division of Corporations

Tallahassee, FL.32314

P.O. Box 6327

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

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

Lancet Indemnity Risk Retention Group, Inc.	
(Name of Corporation)	
Document Number of Corporation (if	f known)
Nevada	
(Incorporated Under Laws of	<b>)</b>
This corporation is no longer transacting business or conducting affi voluntarily surrenders its authority to transact business or conduct af	ffairs in Florida.
This corporation revokes the authority of its registered agent in F	Florida to accept service on its behalf and
appoints the Department of State as its agent for service of process the time it was authorized to transact business or conduct affairs in I	Florida.
The following is a current mailing address for the corporation:	9 APR
1605 Main Street, Suite 800	SSS 10
(Mailing Address)	100 PR 10
Sarasota, FL 34236	32 A 11
(City/ State /Zip)  The corporation agrees to notify the Department of State in the future	re of any change in its mailing address.
(Signature of a director, president or other officer - if in the hands of a receiver or other sount appointed fiduciary, by that fiduciary)  Anthony Maniscalco	COO/Treasurer
(Typed or printed name of person signing)	(Title of person signing)