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Withdrawa

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SECRETARY OF STATE OR OR

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COVER LETTER

TO: Amendment Section Division of Corporations		
SUBJECT: American Trust & Savings Bank		
(Name of Corporation)		
DOCUMENT NUMBER: F08000004663		
The enclosed withdrawal application and fee are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
Robert J Donovan		
(Name of Person)		
American Trust & Savings Bank		
(Firm/Company)		
895 Main St		
(Address)		
Dubuque IA 52001		
(City/State and Zip code)		
For further information concerning this matter, please call:		
Robert J Donovan at (563) 589-0816		
(Name of Person) (Area Code & Daytime Telephone Number)		
MAILING ADDRESS: STREET ADDRESS:		

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

American Trust & Savings Bank	
(Name of Corpor	ation)
	器 第 五
F08000004663	ration (if known)
(Document Number of Corpo	ration (if known)
	SER E D
lowa	Eg 🔅
(Incorporated Under	Laws of)
	S _{em} and i
This corporation is no longer transacting business or conduc	ting affairs within the State of Florida and hereby
voluntarily surrenders its authority to transact business or con	
This corporation revokes the authority of its registered age appoints the Department of State as its agent for service of pr	
time it was authorized to transact business or conduct affairs	
The following is a current mailing address for the corporation	ı:
005 M-1- 04	
895 Main St (Mailing Addre	
(Mailing Addre	SS)
D. b 14 50004	
Dubuque IA 52001 (City/ State /Zi	
(City/ State/Zi	P)
The corporation agrees to notify the Department of State in th	ne future of any change in its mailing address.
O(1/k)	
Low to to	February 16, 2010
(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)	(Date)
•	
Robert J Donovan	Assistant Secretary
(Typed or printed name of person signing)	(Title of person signing)

FILING FEE \$35