

FO9 000002348

(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

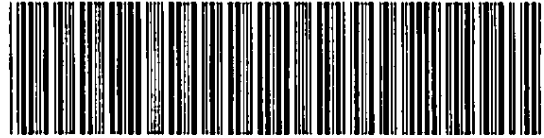
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SECRETARY OF STATE
TALLASSEE, FLORIDA

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LAW OFFICES AT 1020, PSC

318 DE DIEGO AVE.
SUITE 205 B
SAN JUAN, PR. 00909

DIANA L. OJEDA CASTRO
MYRLENA ORTIZ MARCANO
OF COUNSEL
BRIGITTE KRUMHANSL

P. 787.758.9989
F. 787.977.5454

August 3rd, 2017

Amendment Section
Division of Corporations
Florida Department of State
PO Box 6327
Tallahassee, FL 32314

SUBJECT: FirstBank Insurance Agency, Inc.
Document Number: F0900002348

To whom it may concern:

As legal representatives to FirstBank Insurance Agency, LLC (formerly FirstBank Insurance Agency, Inc), we are submitting the withdrawal application of FirstBank Insurance Agency, Inc, Document Number F0900002348, to be filed back to back with the enclosed "Application By Foreign Limited Liability Company for Authorization to Transact Business in Florida" of FirstBank Insurance Agency, LLC. Pursuant to the fee requirements established by the Division of Corporations, we include the following payments:

- **Withdrawal Application-Filing Fee & Certificate of Status-** Check Number 010266 in the amount of \$43.75
- **Application by Foreign Liability Company-** Filing Fee & Certificate of Status - Check Number 010267 in the amount of \$130.00

In addition, enclosed is a Certificate of Existence issued on June 23, 2017 by the Puerto Rico State Department establishing that FirstBank Insurance Agency, LLC is duly authorized as a domestic for profit limited liability company.

Please feel free to contact me directly, should you have any questions or need additional information on the above.

Cordially,


Myrlena Ortiz Marciano

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: FIRSTBANK INSURANCE AGENCY, INC.

(Name of Corporation)

DOCUMENT NUMBER: F09000002348

The enclosed **withdrawal application** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Myrlena Ortiz, Esq.

(Name of Person)

Law Offices at 1020, PSC

(Firm/Company)

318 Ave. De Diego, Suite 205B

(Address)

San Juan, PR 00909

(City/State and Zip code)

For further information concerning this matter, please call:

Myrlena Ortiz, Esq. at (787) 758-9989

(Name of Person)

(Area Code & Daytime Telephone Number)

Enclosed is a check for the amount:

☐ \$35 Filing Fee ☒ \$43.75 Filing Fee & Certificate 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 ADDRESS:

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

STREET ADDRESS:

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

FIRSTBANK INSURANCE AGENCY, INC.

(Name of Corporation)

F09000002348

(Document Number of Corporation (if known))

Puerto Rico

(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:

PO BOX 9146

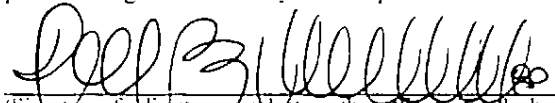
(Mailing Address)

San Juan, PR 00908-9146

(City/ State /Zip)

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SECRETARY OF STATE
TREASURY

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)

7-26-17

(Date)

Alfredo Báez, Esq.

(Typed or printed name of person signing)

President

(Title of person signing)

FILING FEE \$35