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From:

Account Name

: C T CORPORATION SYSTEM

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DISSOLUTION OR WITHDRAWAL NATIONAL PENN INSURANCE SERVICES GROUP, INC.

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TO: Amendment Section Division of Corporations	
SUBJECT: NATIONAL PENN INSURAN	ICE SERVICES GROUP, INC.
SUBJECT: MATERIAL INCOME.	(Name of Corporation)
DOCUMENT NUMBER: F1000000094	'
The enclosed withdrawal application a	nd fee are submitted for filing.
Please return all correspondence concern matter to the following:	ing this
TAMMY J. STRINGER	
**************************************	(Name of Person)
NATIONAL PENN INSURANCE S	
	(Firm/Company)
200 WEST SECOND STREET, 3RD	FLOOR
	(Address)
WINSTON-SALEM, NC 27101	•
	(City/State and Zip code)
For further information concerning this r	natter, please call:
CATHY GALFO	at (336) 733-2426
(Name of Person) Enclosed is a check for the amount:	(Area Code & Daytime Telephone Number)
\$35 Filing Fee \$43.75 Filing Fee Certificate of State	
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

NATIONAL PENN INSURANCE SERVICES GROUP, INC.

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

(Name of Corporation)

	tion (if known)	
PENNSYLVANIA		
(Incorporated Under L	aws of)	
is corporation is no longer transacting business or conducti funtarily surrenders its authority to transact business or cond	luct affairs in Florida.	
is corporation revokes the authority of its registered agen points the Department of State as its agent for service of pre- time it was authorized to transact business or conduct affai	rocess based on a cause of action a	s behalf and rising during
e following is a current mailing address for the corporation:		至。 =
c/o KATRINA D. RAMEY, BB&T, 200 WEST SECOND SI	TREET, 3RD FLOOR	
(Mailing Address))	<u>۲</u> ۵
WINSTON-SALEM, NC 27101		
11 11 10 10 11 10 11 10 11 10 11		<u> </u>
(City/ State /Zlp)	•	9月 2
(City/ State /Zlp)		
(City/ State /Zlp)	e future of any change in its mailing	
(City/ State /Zlp)		