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TO:	Amendment Section Division of Corporations	
SHR.	JECT: Allstar Underwriters, Inc.	
30 D		(Name of Corporation)
DOC	UMENT NUMBER: F10000003482	
The e	enclosed withdrawal application and	fee are submitted for filing.
Pleas	e return all correspondence concerning	g this matter to the following:
	Gina Robinson	
		(Name of Person)
	Allstar Financial Group, LLC	
		(Firm/Company)
	365 Northridge Rd, Ste 400	
		(Address)
	Atlanta, GA 30350	
	(0	City/State and Zip code)
For fi	urther information concerning this mat	ter, please call:
Gina F	Robinson	at (678 832-2132
	(Name of Person)	(Area Code & Daytime Telephone Number)
Enclo	osed is a check for the amount:	
■ \$3		□ \$43.75 Filing Fee & □ \$52.50 Filing Fee, Certified Copy Certificate of Status & Certified (Additional copy is Enclosed) □ \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclose
	Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

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

(Name of Corporation)

Allstar Underwriters, Inc.

	(Document Number of Corporation (if kr	nown)
Georgia	7/30/2010	
(Incorporated Under La	aws of and date authorized to transact bus	siness/conduct its affairs)
y surrenders its authority to oration revokes the authority	acting business or conducting affair to transact business or conduct affair ority of its registered agent in Flor	rs in Florida. rida to accept service on it
	its agent for service of process baseusiness or conduct affairs in Florida	
ving is a current mailing a	address for the cornoration:	
	address for the corporation:	
	·	
	(Mailing Address)	
365 Northridge Rd, Ste 400	·	
365 Northridge Rd, Ste 400	(Mailing Address)	
Wing is a current mailing a 365 Northridge Rd, Ste 400 Atlanta, GA 30350	·	
365 Northridge Rd, Ste 400	(Mailing Address)	
365 Northridge Rd, Ste 400 Atlanta, GA 30350	(Mailing Address)	of any change in its mailing :
Atlanta, GA 30350	(Mailing Address) (City/ State /Zip)	
Atlanta, GA 30350 Pration agrees to notify the	(Mailing Address) (City/ State /Zip) Department of State in the future of the control of the c	of any change in its mailing :
Atlanta, GA 30350	(Mailing Address) (City/ State /Zip) Department of State in the future of the control of the c	

FILING FEE \$35