

## Florida Department of State

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Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (512)418-6949

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## DISSOLUTION OR WITHDRAWAL SOMPO JAPAN CANOPIUS REINSURANCE AG CORP.

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## **COVER LETTER**

TO:	Amendment Section Division of Corporations	
	Someo Jenen Canadius Bairmi	rance AG-Com
SÜBJ	ECT:	(Name of Corporation)
DOC	UMENT NUMBER:	
The e	nclosed withdrawal application	and fee are submitted for filing.
	return all correspondence concer to the following:	ning this
	Thomas M. Dawson	
	<u> </u>	(Name of Person)
	Drinker Biddle & Reath LLP	
		(Firm/Company)
	1177 Avenue of the Americas, 41st	Floor
	· · · · · · · · · · · · · · · · · · ·	(Address)
	New York, New York 10036-2714	
		(City/State and Zip code)
For fu	rther information concerning this	matter, please call:
Thoma	s M. Dawson	at ( 212 248-3160
Enclo	(Name of Person) sed is a check for the amount:	(Arca Code & Daytime Telephone Number)
<b>⊠\$</b> 3:	5 Filing Fee \$43.75 Filing Fee Certificate of Sta	
	MAILING ADDRESS:	
	Amendment Section Division of Corporations	Amendment Section Division of Corporations

2661 Executive Center Circle

Tallahassee, FL. 32301

P.O. Box 6327

Tallahassee, FL.32314

To: Page 4 of 4

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TALLAMÁSSEÉ, FLORIDA

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

Sompo Japan Canopius Reinsurance AG Corp.	
(Name of Corporation)	
(Document Number of Corporation (if known)	
Switzerland	
(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:	
140 Broadway, Suite 2210	
(Mailing Address)	
New York, New York 10005	
(City/ State /Zip)	
The corporation agrees to notify the Dopartment of State in the future of any change in its mailing address.	
(Signature of a director, president or other officer = II in the hands of a (Date) receiver or other court appointed fiduciary, by that fiduciary)	
ylva de Fluiter Patrick Schumacher hief Operating Officer Chief Financial Officer	
ompo Japan Canopius Reinsurance AG Sompo Japan Canopius Reinsurance AG	
(Typed or printed name of person signing) (Title of person signing)	

FILING FEE \$35