

F17000002808

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

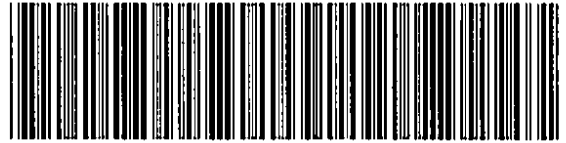
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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08/27/18--01035--014 **35.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2018 AUG 27 A 11:55

FILED

AUG 29 2018

W/D

More Than Just Insurance.

Plymouth Rock
assurance.

Plymouth Rock Assurance Corporation

695 Atlantic Avenue
Boston, Massachusetts 02111
tel: 617-720-1620
fax: 617-951-1513

plymouthrock.com

August 23, 2018

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

Subject: Plymouth Rock Assurance Corporation

Document Number: F17000002808

Dear Sir or Madam,

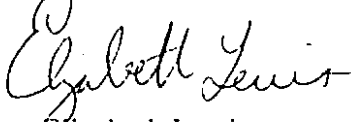
The enclosed withdrawal application and \$35 fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Elizabeth Lewis
Plymouth Rock Assurance Corporation
695 Atlantic Avenue
Boston, MA 02111

For further information concerning this matter, please call me at (617) 951-1006.

Very truly yours,


Elizabeth Lewis
Paralegal

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

Plymouth Rock Assurance Corporation

(Name of Corporation)

F17000002808

(Document Number of Corporation (if known))

The Commonwealth of Massachusetts

(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:

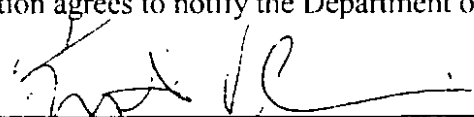
695 Atlantic Avenue

(Mailing Address)

Boston, MA 02111

(City/ State /Zip)

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)

Kristin V. Collins

(Typed or printed name of person signing)

FILED
2018 AUG 27 A 11:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
8/23/18

(Date)

Vice President

(Title of person signing)

FILING FEE \$35