

F19000000214

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

12/11/19--01002--017 *398,75

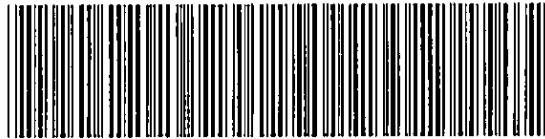
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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CC
withdrawal

DEC 11 2019

J ALBRITTON

Sunshine State Corporate Compliance Company

3458 Lakeshore Drive, Tallahassee, Florida 32312
(850) 656-4724

DATE 12/10/2019

****WALK IN****

ENTITY NAME HEALTHINSURANCE.COM, INC.

DOCUMENT NUMBER _____

****PLEASE FILE THE ATTACHED AND RETURN****

Plain Copy

XXXX

Certified Copy

Certificate of Status

****PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY****

Certified Copy of Arts & Amendments

Certificate of Good Standing

Cert. Copy of Restated Arts & Amends if available. If not provide Cert. Copy of Arts & Amends.

****APOSTILLE' / NOTARIAL CERTIFICATION****

COUNTRY OF DESTINATION _____

NUMBER OF CERTIFICATES REQUESTED _____

TOTAL OWED 43.75

CHECK # 7018

Please call Tina at the above number for any issues or concerns. Thank you so much!

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Healthinsurance.com, Inc.
(Name of Corporation)

DOCUMENT NUMBER: F19000000216

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

Please return all correspondence concerning this matter to the following:

Alison Shores

(Name of Person)

Bass, Berry & Sims PLC

(Firm/Company)

The Tower at Peabody Place - 100 Peabody Place, Suite 1300

(Address)

Memphis, TN 38103-3649

(City/State and Zip code)

For further information concerning this matter, please call:

Michael DeVries at (813) 906-5314
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the amount:

\$35 Filing Fee \$43.75 Filing Fee & \$43.75 Filing Fee & \$52.50 Filing Fee,
Certificate of Status Certified Copy Certificate of Status & Certified
(Additional copy is Copy (Additional copy is enclosed)
Enclosed)

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**

Healthinsurance.com, Inc.

(Name of Corporation)

F19000000216

(Document Number of Corporation (if known))

Delaware

(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:

15438 N. Florida Avenue, Suite 201

(Mailing Address)

Tampa, FL 33613

(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)

December 10, 2019

(Date)

Michael DeVries

(Typed or printed name of person signing)

SVP, Finance & Analytics

(Title of person signing)

FILING FEE \$35