

F2 0000002169

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

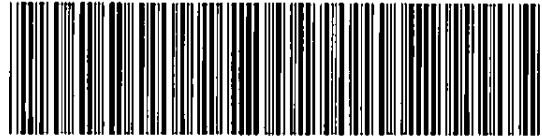
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

J. HORNE
MAY - 9 2024

Office Use Only



500427731895

01/24/24--01012--014 **43.75

FILED
2024 APR 24 PM 3:25
CLERK OF COURT
JUDICIAL DISTRICT OF CLATSOP COUNTY

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Wellington Insurance Services, Inc.

(Name of Corporation)

DOCUMENT NUMBER: F20000002169

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

Please return all correspondence concerning this matter to the following:

Elizabeth Nanez

(Name of Person)

Wellington Insurance Group

(Firm/Company)

6801 Calmont Ave.

(Address)

Fort Worth, TX 76116

(City/State and Zip code)

For further information concerning this matter, please call:

Elizabeth Nanez

at (817) 697-3531

(Name of Person)

(Area Code & Daytime Telephone Number)

Enclosed is a check for the amount:

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

Wellington Insurance Services, LLC

(Name of Corporation)

F20000002169

(Document Number of Corporation (if known))

Texas 7/26/11 (5/4/20 Florida registration)

(Incorporated Under Laws of and date authorized to transact business/conduct its affairs)

FILED
2024 APR 24 PM 3:26
FBI

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:

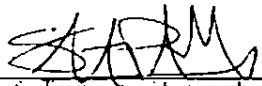
6801 Calmont Ave.

(Mailing Address)

Fort Worth, TX 76116

(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)

4/15/24
(Date)

Steven T. Poston II

(Typed or printed name of person signing)

Secretary

(Title of person signing)

FILING FEE \$35