F94000001386

(Re	questor's Name)	
(Address)		
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(Cit	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Document Number)		
Certified Copies	_ Certificates	s of Status
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TALLAHASSEE FLORIBA

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MID-AMERICA INSURANCE SERVICES, INC.

3001 Meacham Boulevard, Suite 200 - 1SE01

Fort Worth, Texas 76137 Phone: 817/ 820-5854 Fax: 817/ 820-5072

E-mail: Repecca.Dafriels@citifinancial.com

February 1, 2006

Amendment Section Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399

Re: Application by Foreign Corporation for Withdrawal of Authority to Transact Business or

Conduct Affairs in Florida

Dear Sir or Madam:

Enclosed please find the Application by Foreign Corporation for Withdrawal of Authority to Transact Business or Conduct Affairs in Florida to withdraw Mid-America Insurance Services, Inc. Also enclosed is our check for the filing fee in the amount of \$35.00.

If you have any questions, do not hesitate to contact me.

Sincerely,

Rebecca Daniels Legal Administrator

Keleua Daniel

Enclosure

TRANSMITTAL LETTER

, ,		
TO: Amendment Section		
Division of Corporations		
SUBJECT: Mid-America Insurance Service	s, Inc.	
	of corporation)	
DOCUMENT NUMBER: F94000001386		
The enclosed withdrawal application and f	ee are submitted for filing.	
Please return all correspondence concerning matter to the following:	this	
Rebecca Daniels		
	(Name of Person)	
Citi Assurance Services		
	(Firm/Company)	
3001 Meacham Blvd, Ste. 200		
	(Address)	
Fort Worth, TX 76137		
(Ci	ty/State and Zip code)	
For further information concerning this matter	er, please call:	
Rebecca Daniels	at (817) 820-5854	
(Name of Person)	(Area Code & Daytime Telephone Number)	
STREET ADDRESS:	MAILING ADDRESS:	
Amendment Section	Amendment Section	
Division of Corporations	Division of Corporations	
409 E. Gaines St.	P.O. Box 6327	
Tallahassee, FL. 32399	Tallahassee, FL. 32314	

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

Mid-America Insurance Services, Inc.

(Maine of Corp	oranion)
F9400001386	DATE OF THE PARTY
(Document Number of Cor	poration (if known)
Georgia	F STA
(Incorporated Und	er Laws of)
This corporation is no longer transacting business or cond voluntarily surrenders its authority to transact business or conditions.	
This corporation revokes the authority of its registered a appoints the Department of State as its agent for service of time it was authorized to transact business or conduct affair	process based on a cause of action arising during the
The following is a current mailing address for the corporation	on:
3001 Meacham Blvd, Ste. 200	
(Mailing Add	dress)
Fort Worth, TX 76137	
(City/ State)	/Zip)
\bigcirc	
The corporation agrees to notify the Department of State in	the future of any change in its mailing address.
Neck	1/26/2006
(Signature of a directed president of other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)	(Date)
Gregg H. Lehman	Secretary
(Typed or printed name of person signing)	(Title of person signing)
FILING FE	E \$35

Attached is a form to withdraw the authority of a foreign corporation that is transacting business or conducting affairs in Florida. The requirements are as follows:

- Pursuant to section 607.1520 or 617.1520, Florida Statutes, the attached application should be completed in its entirety.
- > The fees are as follows:

Filing Fee - \$ 35.00 includes a letter of acknowledgment and a certificate of status/withdrawal

Certified Copy (optional) - \$ 8.75

Certificate of Status (additional) (optional) - 8.75

- > Checks should be made payable to the Florida Department of State.
- Please complete the attached transmittal letter or your own cover letter and return it with the withdrawal application and fee.

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

Street Address: Amendment Section Division of Corporations 409 E. Gaines St. Tallahassee, FL. 32399

For further information, you may call (850) 245-6050.

CR2E023 (11/03)