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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number : 110432003053 Phone : (561)694-8107

Fax Number : (561)214-8442

DISSOLUTION OR WITHDRAWAL WESTWOOD INSURANCE AGENCY, INC.

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D COMMELL

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

WESTWOOD INSURANCE AGENCY, INC.		
(Name of Corporati	ion)	
F97000003781		
(Document Number of Corpora	tion (if known)	
California: 07/21/1997		
(Incorporated Under Laws of and date authorized to tra	ansact business/conduct its affairs)	
This corporation is no longer transacting business or conductivoluntarily surrenders its authority to transact business or conductivoluntarily surrenders its authority to transact business or conductivoluntarily surrenders its authority of its registered agent appoints the Department of State as its agent for service of proctime it was authorized to transact business or conduct affairs in	uct affairs in Florida. t in Florida to accept service on its behalf and cess based on a cause of action arising during the	
The following is a current mailing address for the corporation:		
8407 FALLBROOK AVENUE, STE. 200	28 3 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	
(Mailing Address) ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~	
WEST HILLS, CA 91304	TIL PA	
(City/ State /Zip)		
The corporation agrees to notify the Department of State in the		
Lambellen	06/06/2022	
(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)	(Date)	
Lauren Underwood	Attorney-in-Fact	
(Typed or printed name of person signing)	(Title of person signing)	

1/001 Fax Server



June 8, 2022

FLORIDA DEPARTMENT OF STATE

Division of Corporations

WESTWOOD INSURANCE AGENCY, INC. 210 INTERSTATE N. PARKWAY, STE. 400

ATTN: LICENSING ZCSIA ATLANTA, GA 30339

SUBJECT: WESTWOOD INSURANCE AGENCY, INC.

REF: F97000003781

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

PLEASE ADD THE DATE THE CORPORATION WAS AUTHORIZED TO TRANSACT BUSINESS IN THE STATE OF FLORIDA TO THE 3RD LINE OF THE WITHDRAWAL FORM. THIS DATE IS 07/21/1997.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Darlene Connell FAX Aud. #: H22000196562

Regulatory Specialist II Supervisor Letter Number: 322A00012878