

F98000003864

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

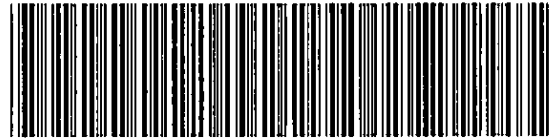
(Business Entity Name)

(Document Number)

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2023 MAR -8 AM 11:11  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

RECEIVED

2023 MAR -8 PM 3:59  
TALLAHASSEE, FLORIDA

A. RAMSEY

MAR 09 2023

FILE 1ST

CORPORATION SERVICE COMPANY  
1201 Hays Street  
Tallahassee, FL 32301  
Phone: 850-558-1500

ACCOUNT NO. : I200000000195

REFERENCE : ~~5437651~~ *8331191*

AUTHORIZATION :

COST LIMIT : \$ 35.00

ORDER DATE : February 6, 2023

ORDER TIME : 12:50 PM

ORDER NO. : 437651-065

CUSTOMER NO: 8331191

FOREIGN FILINGS

NAME: MCGRIFF INSURANCE SERVICES,  
INC.

XX CORPORATE  
       LIMITED PARTNERSHIP  
       LIMITED LIABILITY COMPANY

XXXX WITHDRAWAL/CANCELLATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

       CERTIFIED COPY  
XX        PLAIN STAMPED COPY  
       CERTIFICATE OF STATUS

CONTACT PERSON: Alexxis Weiland-sorenson - EXT#

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

McGriff Insurance Services, Inc.

(Name of Corporation)

F98000003864

(Document Number of Corporation (if known))

North Carolina 07/08/1998

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

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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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:

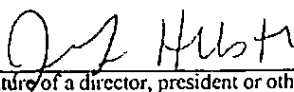
c/o Hasana Stanberry, Truist 214 N Tryon St

(Mailing Address)

Charlotte, NC 28202-1078

(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)

Jennifer Hiester

(Typed or printed name of person signing)

3/3/23  
(Date)

Secretary

(Title of person signing)

**FILING FEE \$35**