

M02000001975

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

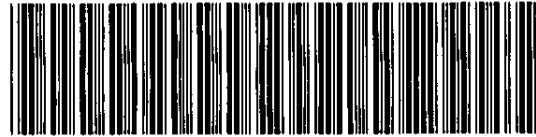
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

N. Culligan AUG 29 2013



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 779115 4719544

AUTHORIZATION :

COST LIMIT : \$ 25.00

ORDER DATE : August 27, 2013

ORDER TIME : 10:26 AM

ORDER NO. : 779115-020

CUSTOMER NO: 4719544

FOREIGN FILINGS

NAME: MERCURY CLAIMS & ASSISTANCE  
OF WISCONSIN, LC

\_\_\_\_ CORPORATE  
\_\_\_\_ LIMITED PARTNERSHIP  
XX 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: Susie Knight - EXT# 52956

EXAMINER: \_\_\_\_\_

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR  
WITHDRAWAL OF AUTHORITY TO TRANSACT BUSINESS IN  
FLORIDA**

Mercury Claims & Assistance of Wisconsin, LLC

\_\_\_\_\_  
(Name of limited liability company)

Wisconsin

\_\_\_\_\_  
(Jurisdiction of its organization)

M02000001975

\_\_\_\_\_  
(Florida Document Number)

This limited liability company is no longer transacting business in Florida and surrenders its authority to transact business in this state.

This limited liability company revokes the authority of its registered agent 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 in Florida.

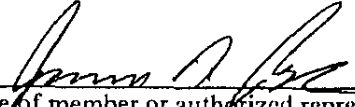
175 Water Street

\_\_\_\_\_  
(Mailing address)

New York, New York 10038

\_\_\_\_\_  
(City/State/Zip)

The limited liability company agrees to notify the Department of State in the future of any change in its mailing address.

  
\_\_\_\_\_  
(Signature of member or authorized representative of a member)

James D. Page

\_\_\_\_\_  
(Typed or printed name of signee)

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2013 AUG 28 AM 10:10

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**Filing Fee: \$25.00**