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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

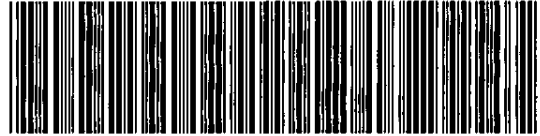
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

S. HAWKES

NOV - 3 2009

EXAMINER



Crowe Horwath™

Crowe Horwath LLP
Independent Member Crowe Horwath International

One Mid America Plaza, Suite 700
Post Office Box 3697
Oak Brook, Illinois 60522-3697
Tel 630.574.7878
Fax 630.574.1608
www.crowehorwath.com

October 29, 2009

VIA UPS

Secretary of State
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

850/245-6051

Dear Secretary:

Enclosed, please find an original, and one copy, of the executed Withdrawal of Authority of Crowe Chizek and Company LLC from doing business Florida. Enclosed is check number 239616 for the filing fee in the amount of thirty dollars (\$30.00).

Please return a date stamped copy confirming the filing date via U.S. mail in the enclosed self addressed, pre-paid envelope.

If you have any questions or concerns regarding this filing please contact me at 630/575-4337.

Sincerely,

Catherine J. Smith
Counsel

Enclosures

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Crowe Chizek and Company LLC
(Name of Foreign Limited Liability Company)

Dear Sir or Madam:

The enclosed withdrawal and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Catherine Smith

(Name of Person)

Crowe Horwath LLP c/o legal group 7th floor

(Firm/Company)

PO Box 3697

(Address)

Oak Brook, IL 60522-3697

(City/State and Zip Code)

For further information concerning this matter, please call:

Catherine Smith

(Name of Person)

at (630) 575-4337

(Area Code & Daytime Telephone Number)

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

☐ \$25 Filing Fee

☒ \$30 Filing Fee &
Certificate of Status

☐ \$55 Filing Fee &
Certified Copy

☐ \$60 Filing Fee,
Certificate of Status &
Certified Copy

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

Crowe Chizek and Company LLC

(Name of limited liability company)

Indiana

(Jurisdiction of its organization)

This limited liability company is no longer transacting business in Florida and surrenders 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.

320 E Jefferson Blvd.

(Mailing address)

South Bend, IN 46601

(City/State/Zip)

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

Fred J. Bauters
(Signature of member or authorized representative of a member)

Fred J. Bauters, Chief Risk Officer

(Typed or printed name of signee)

Filing Fee: \$25.00

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09 NOV -2 PM 11:27
TALLAHASSEE, FLORIDA
SECRETARY OF STATE