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| (Re | questor's Name) | |
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| (Ad | dress) | |
| (Ad | dress) | <u> </u> |
| (Cit | ty/State/Zip/Phone | e #) |
| PICK-UP | WAIT | MAIL |
| (Bu | siness Entity Nar | ne) |
| (Do | ocument Number) | 113 III II I |
| Certified Copies | _ Certificates | s of Status |
| Special Instructions to | Filing Officer: | |
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Office Use Only



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T. BROWN

COVER LETTER

| | gistration vision of (| Section Corporations | | |
|--|--|--|-------------------------------------|--------------------------------|
| SUBJECT: | Texas Wasatch Insurance Holdings Group LLC | | | |
| Sobole 1. | | (Name of For | reign Limited Liabil | ity Company) |
| Dear Sir or l | Madam: | | | |
| The enclose | d withdra | wal and fee(s) are submitte | d for filing. | |
| Please return | n all corre | espondence concerning this | matter to the follow | ving: |
| Meaghar | n Daws | on | | |
| ••• | | (Name of Person) | | _ |
| Goosehe | ad Inst | ırance | | |
| | | (Firm/Company) | , | |
| 100 E. R | oyal La | ne suite 320 | | |
| | | (Address) | | |
| irving, tx | 75039 | | | |
| • | | (City/State and Zip Cod | e) | |
| For further i | nformatic | on concerning this matter, p | lease call: | |
| Meaghar | Daws | on | 214 at (| 838-5225 |
| | (Na | me of Person) | (Area Cod | le & 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 | g Fee | □ \$30 Filing Fee & Certificate of Status | □ \$55 Filing Fee Certified Copy | |



Goosehead Insurance Agency 100 East Royal Lane, Suite 320 Irving, Texas 75039 800-474-1377 866-877-6250 (fax)

April 20, 2015

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

To Whom It May Concern:

Attached you will find the application to withdraw and cancel the certificate of authority of a foreign limited liability company and the corresponding check.

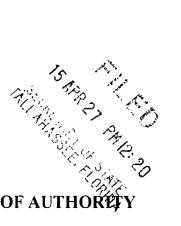
Please let me know if you need any further information to process this request.

Thanks,

Meaghan Dawson

Recruiting and Operations Associate Meaghan.dawson@goosehead.com

214-838-5225



NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

| Texas Wasatch Insurance Holdings Group, LLC |
|---|
| (Name of limited liability company) |
| Texas |
| (Jurisdiction of its organization) |
| 2/27/2008 |
| (Date registered with Florida Department of State) |
| M0800000951 |
| (Florida Document Number) |
| This limited liability company is withdrawing its certificate of authority in this state. (Signature of authorized representative) Mark Jones |
| (Typed or printed name of signee) |

Filing Fee: \$25.00