M09 660000867

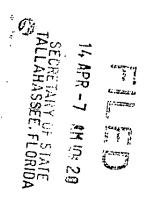
(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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Central Licensing Bureau, Inc. 1501 NORTH UNIVERSITY

1501 NORTH UNIVERSITY
SUITE 550
LITTLE ROCK, ARKANSAS 72207-5271
www.centrallicensingbureau.com
(501) 864-8044
FAX - (501) 664-6182

April 2, 2014

State of Florida Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Dear Sir/Madam:

Enclosed please find the necessary documents to withdraw the authority of Eastern Insurance Acquisition Agency, LLC to conduct business in your state.

I trust this letter and the enclosed documents/fees place them in compliance with your state statutes. If any further action is required, please do not hesitate to contact me.

Thank you for your consideration in this filing.

Sincerely,

Brenda Anthony

Corporate Qualification Division

/bsa

Enclosures

COVER LETTER

Division of	Corporations '		
SURJECT. Eastern	Insurance Acquisition Age	ncy, LLC	
		eign Limited Liability C	ompany)
Dear Sir or Madam:			
The enclosed withdra	awal and fee(s) are submitted	d for filing.	
Please return all corr	espondence concerning this	matter to the following:	•
Brenda Anthony			
	(Name of Person)		
Central Licensing B	ureau	,	
	(Firm/Company)		
1501 N University,	Suite 550		
	(Address)		
Little Rock, AR 722	207		
	(City/State and Zip Cod	e)	
For further informati	on concerning this matter, p	lease call:	
Brenda Anthony		501 at (664-8044
(N	ame of Person)		Daytime Telephone Number)
Registratior Division of Clifton Bui 2661 Execu Tallahassee	Corporations	Registi Divisio P.O. B Tallaha	ING ADDRESS: ration Section on of Corporations ox 6327 assee, Florida 32314
■ \$25 Filing Fee	□ \$30 Filing Fee & Certificate of Status	□ \$55 Filing Fee & Certified Copy	☐ \$60 Filing Fee, Certificate of Status & Certified Copy

TO:

Registration Section

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

Eastern Insurance	e Acquisition Agency, LLC			
	(Name of limited liability company)			
Pennsylvania				
	(Jurisdiction of its organization)			
03/03/2009				
	(Date registered with Florida Department of State)			
M09000000867				
	(Florida Document Number)			
This limited lia	ability company is withdrawing its certificate of authority in this	is state.		
	H. Will	SECRE FALLA	14 APR	भाक्ष्य <u>ुव्य</u> गात्
	(Signature of authorized representative)	TAIN	R - 7	CONTRACTOR OF THE PARTY OF THE
	Brian Corbett, Managing Member	m _C	727	included in
	(Typed or printed name of signee)	FLORIDA	M IO: 20	

Filing Fee: \$25.00