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COVER LETTER

Registration Section **Division of Corporations** Highpoint Risk Services, LLC SUBJECT: (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: Sherry Walker (Name of Person) Highpoint Risk Services, LLC (Firm/Company) 4455 LBJ Freeway #1080 (Address) Dallas, TX 75244 (City/State and Zip Code) For further information concerning this matter, please call: Sherry Walker (Name of Person) (Area Code & Daytime Telephone Number) STREET/COURIER ADDRESS: MAILING ADDRESS: Registration Section Registration Section Division of Corporations **Division of Corporations** Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, Florida 32314 Tallahassee, Florida 32301

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TO:

FILED 2015 MAY -1 PH 12: 21 SECRETARY OF STATE TALLAHASSEE, FLORIDA

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

Highpoint Risk Services, LLC		
(Name of limited liability company)		
Texas		
(Jurisdiction of its organization)		
02/16/2012		
(Date registered with Florida Department of State)		
M12000000914		
(Florida Document Number)		
This limited liability company is withdrawing its certificate of authority in this state.		
(Signature of authorized representative) C.D. Wood, Jr.		
(Typed or printed name of signee)		

Filing Fee: \$25.00