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25 August 2009

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

RE: Horace Mann Educator Benefits Consulting Corporation

Dear Sir/Madam:

Enclosed please find the Application by Foreign Corporation for Withdrawal for the above stated company, along with a copy of this form. Please file-stamp the copy and return this to me in the enclosed envelope. Also enclosed is a check in the amount of \$35 representing payment of the filing fee.

If you have any questions, I can be reached at (217) 788-5710

Thank you for your assistance in this matter.

Sincerely,

Linea Michael

Manager, Law Operations

Enclosures

COVER LETTER

SUBJECT: Horace Mann Educator Benefits Consulting Corporation (Name of Corporation) DOCUMENT NUMBER: The enclosed withdrawal application and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Linea K. Michael (Name of Person) Horace Mann (Firm/Company) 1 Horace Mann Plaza (Address) Springfield, IL 62715 (City/State and Zip code) For further information concerning this matter, please call:	Division of Corporations
The enclosed withdrawal application and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Linea K. Michael (Name of Person) Horace Mann (Firm/Company) 1 Horace Mann Plaza (Address) Springfield, IL 62715 (City/State and Zip code) For further information concerning this matter, please call:	SUBJECT: Horace Mann Educator Benefits Consulting Corporation
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(Address) Springfield, IL 62715 (City/State and Zip code) For further information concerning this matter, please call:	(Firm/Company)
Springfield, IL 62715 (City/State and Zip code) For further information concerning this matter, please call:	1 Horace Mann Plaza
(City/State and Zip code) For further information concerning this matter, please call:	(Address)
For further information concerning this matter, please call:	Springfield, IL 62715
	(City/State and Zip code)
047 700 5740	For further information concerning this matter, please call:
Linea K. Michael $at(217)/88-5710$	Linea K. Michael _{at (} 217 ₎ 788-5710
(Name of Person) (Area Code & Daytime Telephone Number)	
MAILING ADDRESS: Amendment Section Amendment Section	

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32301

Clifton Building 2661 Executive Center Circle

APPLICATION BY FOREIGN CORPORATION FOR WITHDRAWAL OF AUTHORITY TO TRANSACT BUSINESS OR CONDUCT AFFAIRS IN FLORIDA

Horace Mann Educator Benefits Consulting Corporation (Name of Corporation)		
(Name of Corporat	ion)	
(Document Number of Corporation (if known)		
Illinois		
(Incorporated Under L	aws of)	
This corporation is no longer transacting business or conductivoluntarily surrenders its authority to transact business or conductivoluntarily surrenders its authority to transact business or conductation appoints the Department of State as its agent for service of protime it was authorized to transact business or conduct affairs in The following is a current mailing address for the corporation:	uct affairs in Florida. t in Florida to accept service on its behalf and cess based on a cause of action arising during the	
	,	
1 Horace Mann Plaza (Mailing Address		
Springfield, IL 62715 (City/ State /Zip	FILED AUG 28 PH 3 CRETARY OF ST AHASSEE, FLO	
The corporation agrees to notify the Department of State in the	future of any change in its matter address.	
(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)	08/12/09 (Date)	
Linea K. Michael	Assistant Corporate Secretary	

FILING FEE \$35

(Typed or printed name of person signing)

(Title of person signing)