



Member of
AEGON
Insurance Group
Peoples Benefit Life Insurance Company
Life Investors Insurance Company of America
Monumental Life Insurance Company
Western Reserve Life Assurance Company of Ohio
Transamerica Life Insurance Company

Alliances Group
400 West Market Street
Louisville, Kentucky 40202
Phone: 502-560-2000
FAX: 502-560-4968

December 28, 2001

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*****35.00 *****35.00

Florida Department of State
Divisions of Corporations
409 E. Gains St.
Tallahassee, FL 32399

RE: Foreign Corporation Certificate of Withdrawal Application

Dear Sir or Madam:

Enclosed please find an Application for Certificate of Withdrawal for DurCo Agency, Inc. and a check in the amount of \$35.00 for the filing fee. If you have any questions concerning this request, please contact me at the number listed below.

Thank you for your prompt consideration.

Yours truly,

Robin M. Livingston

Robin M. Livingston
Legal Specialist
Alliances Group
400 W. Market, 14th floor
Louisville, KY 40202
(502) 560-2844
(502) 560-2919 - fax

*WTH
1-11-02
OK*

encl.

FILED
02 JAN -2 AM 11:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

Durco Agency Inc.

(Name of Corporation)

Commonwealth of Virginia

(Incorporated Under Laws Of)

This corporation is no longer transacting business or conducting affairs within the State of Florida and hereby voluntarily surrenders its authority to transact business or conduct affairs in Florida.

This corporation revokes the authority of its registered agent in Florida 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 or conduct affairs in Florida.

The following is a current mailing address for the corporation:

P.O. Box 34310

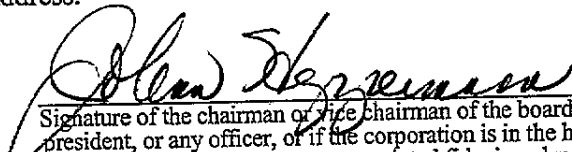
(Mailing Address)

Louisville, Kentucky 40232-4310

(City/ State /Zip)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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


Signature of the chairman or vice chairman of the board,
president, or any officer, or if the corporation is in the hands of a
receiver, trustee, or other court-appointed fiduciary, by that fiduciary.


Title

Jo Ann Heppermann

Typed or printed name

12/18/01

Date