

P 24156

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

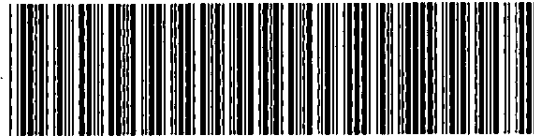
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DEC 16 2011

EXAMINER



800215195278

RECEIVED

11 DEC 16 PM 2:01

SECRETARY OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
11 DEC 16 PM 3:15



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 025551 7573060

AUTHORIZATION :

COST LIMIT : \$ 35.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
11 DEC 16 PM 3:15

ORDER DATE : December 14, 2011

ORDER TIME : 1:04 PM

ORDER NO. : 025551-025

CUSTOMER NO: 7573060

FOREIGN FILINGS

NAME: THE DOCTORS' COMPANY INSURANCE
SERVICES

☐ CORPORATE
☒ LIMITED PARTNERSHIP
☐ LIMITED LIABILITY COMPANY

XXXX WITHDRAWAL/CANCELLATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

☐ CERTIFIED COPY
☒ PLAIN STAMPED COPY
☐ CERTIFICATE OF STATUS

CONTACT PERSON: Becky Peirce - EXT# 2919

EXAMINER: _____

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

The Doctors' Company Insurance Services

(Name of Corporation)

P24156

(Document Number of Corporation (if known))

California

(Incorporated Under Laws of)

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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:


c/o Michael O'Donohue, 185 Greenwood Road

(Mailing Address)

Napa, CA 94558

(City/ State /Zip)

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


(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)

12/4/11
(Date)

David A. McHale

(Typed or printed name of person signing)

Secretary

(Title of person signing)

FILING FEE \$35