

P27645

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

7-28  
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**TRANSMITTAL LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Great Midwest Insurance Company  
(Name of corporation)

**DOCUMENT NUMBER:** P27645

The enclosed **withdrawal application** and fee are submitted for filing.

Please return all correspondence concerning this  
matter to the following:

Suzanne Hartmann-Linck  
(Name of Person)

Great Midwest Insurance Company  
(Firm/Company)

9821 Katy Freeway, Suite 850  
(Address)

Houston, TX 77024  
(City/State and Zip code)

For further information concerning this matter, please call:

Suzanne Hartmann-Linck at (713) 935-7400  
(Name of Person) (Area Code & Daytime Telephone Number)

**STREET ADDRESS:**  
Amendment Section  
Division of Corporations  
409 E. Gaines St.  
Tallahassee, FL. 32399

**MAILING ADDRESS:**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL. 32314

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

Great Midwest Insurance Company  
(Name of Corporation)

P27645  
(Document Number of Corporation (if known))

Michigan  
(Incorporated Under Laws of)

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TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

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:

9821 Katy Freeway, Suite 850  
(Mailing Address)

Houston, TX 77024  
(City/ State /Zip)

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

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

7/14/04  
(Date)

Suzanne Hartmann-Linck  
(Typed or printed name of person signing)

Treasurer / Sec.  
(Title of person signing)

**FILING FEE \$35**