

F0500000 3306

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

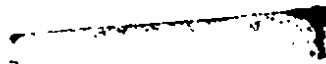
Certified Copies _____ Certificates of Status _____

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AUG 09 2017
S. YOUNG

FILED

17 AUG -8 AM 8:58

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2017 AUG -8 PM 4:04

CT CORP

3458 Lakeshore Drive, Tallahassee, FL 32312

850-656-4724

850-508-1891 (cell)

Date: 8/8/17
ACCT. 120160000072

will DW

Name:	<u>ECC Insurance Brokers Inc.</u>
Document #:	
Order #:	<u>10388936</u>

Certified Copy of Arts & Amend:			
Plain Copy:			
Certificate of Good Standing:			
Apostille/Notarial Certification:		Country of Destination:	
		Number of Certs:	

Filing:	Certified:
	<u>Plain:</u>
	COGS:

Availability _____
Document _____
Examiner _____
Updater _____
Verifier _____
W.P. Verifier _____
Ref# _____

Amount: \$ 35.00

Thank you!

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

ECC Insurance Brokers, Inc.

(Name of Corporation)

F05000003306

(Document Number of Corporation (if known))

Illinois

(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:

220 S. Ridgewood Ave.

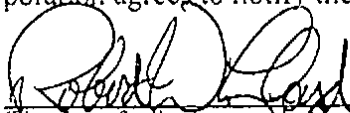
(Mailing Address)

Daytona Beach, Fl. 32114

(City/ State /Zip)

RECEIVED
STATE OF FLORIDA
AUG - 8 PM 6:50
11 11

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)

8/4/17

(Date)

Robert W. Lloyd

(Typed or printed name of person signing)

VP & Secretary

(Title of person signing)

FILING FEE \$35