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Michael G. Adams Kentucky Secretary of State Received and Filed: 7/30/2024 10:45 AM Fee Receipt: \$40.00



COMMONWEALTH OF KENTUCKY MICHAEL G. ADAMS, SECRETARY OF STATE

Division of Business Filings P.O. Box 718 Frankfort, KY 40602 (502) 564-3490 www.sos.ky.gov	Certificate of Withdrawal (Foreign Business Entity)		WFE
	S 14A - 030 the undersigned applies for a ce d, for that purpose, submits the following stat		val on behalf of the
1. The name of the business en	tity is		
	(The name must be identical to the name	on record with the	Secretary of State.)
2. The state or country of forma	tion is Pennsylvania		
The Secretary of State may for on the Secretary of State and	orward to the business entity at the following d commits to notify the Secretary of State of a	street address any any future changes	process served to this address:
300 N Beach Street	Daytona Beach	FL	32114
Street Address (No Post Office Bo	ox Numbers) City	State	Zip Code
in the Commonwealth or pursua authority from the commissioner 5. The business entity revokes appoints the Secretary of State a during the time it was authorized of State in the future of any char	-	a foreign insurer w service of process eeding based on a	vith a certificate of s on its behalf and cause of action arising
6. This application will be effecti	ive upon filing.		
I declare under penalty of perjur	y under the laws of Kentucky that the forgoing	ງ is true and correc	et.
Jung	James Lanni		7/9/2024
Signature of Authorized Represen	ntative Printed Name		/ Date