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Michael G. Adams Kentucky Secretary of State Received and Filed: 11/25/2024 2:52 PM Fee Receipt: \$40.00



## COMMONWEALTH OF KENTUCKY MICHAEL G. ADAMS, SECRETARY OF STATE

P.O. Box 718 Frankfort, KY 40602 (502) 564-3490 www.sos.ky.gov	Certificate of Withdrawa (Foreign Business Entity)	al	WFE
	S 14A - 030 the undersigned applies fo d, for that purpose, submits the followin		on behalf of the
1. The name of the business ent	tity is SIEMENS ADVANTA SOLUTION	S CORP.	·
	(The name must be identical to the	name on record with the Se	cretary of State.)
2. The state or country of format	ion is Delaware		·
	orward to the business entity at the follood commits to notify the Secretary of Sta		
5980 West Sam Houston Parkway N		TX	77041
Street Address (No Post Office Bo	ox Numbers) City	State	Zip Code
in the Commonwealth or pursuar authority from the commissioner  5. The business entity revokes to appoints the Secretary of State at	the authority of its registered agent to a is its agent for service of process in any to transact business in the Commonwe ge in its mailing address.	ntity is a foreign insurer with accept service of process or a proceeding based on a ca	n a certificate of n its behalf and ause of action arising
o. This application will be effective	ve aport ming. Opon Prining		
I declare under penalty of perjury	under the laws of Kentucky that the fo	rgoing is true and correct.	
Carol Jizmejia	n CAROL JIZME	JIAN, SECRETARY	07/16/2024
Signature of Authorized Represen	tative Printed Name		Date

(02/23)