Michael G. Adams Secretary of State P. O. Box 718 Frankfort, KY 40602-0718 (502) 564-3490 http://www.sos.ky.gov

Certificate of Withdrawal

Pursuant to the provisions of KRS 14A.9-060, the foreign business entity executes the following certificate of withdrawal:

Article I: The name of the limited liability limited partnership is

ATLANTIC ALL RISK INSURANCE BROKERAGE, LP

Article II: The state or country of formation is Florida

Article III: The Secretary of State may forward to the business entity at the following street adress any process served on the Secretary of State and commits to notify the Secretary of State of any future changes to this address.

330 E. CROWN POINT ROAD, WINTER GARDEN, FL, 34787

Article IV: The business entity is not transacting business in the Commonwealth and surrenders its authority to transact business in the Commonwealth.

Article V: The business entity revokes the authority of its registered agent to accept service of process on its behalf and appoints the Secretary of State as its agent for service of process in any proceeding based on a cause of action arising during the time it was authorized to transact business in the Commonwealth. The business entity shall notify the Secretary of State in the future of any change in its mailing address.

Article VI: This application will be effective on Wednesday, July 17, 2024.

I declare under penalty of perjury under the laws of the state of Kentucky that the foregoing is true and correct.

Signature of individual signing on behalf of **General Partner: ROBERT CONSALVO** 7/17/2024 P104

1301343.16 Michael G. Adams

Secretary of State Received and Filed

Fee receipt: \$40

7/17/2024 2:13:52 PM

WFE