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Michael G. Adams Kentucky Secretary of State Received and Filed: 3/20/2025 2:38 PM Fee Receipt: \$40.00



COMMONWEALTH OF KENTUCKY MICHAEL G. ADAMS, SECRETARY OF STATE

P.O. Box 718	Certificate	of Withdrawal		WFE
Frankfort, KY 40602	(Foreign F	Business Entity)		
(502) 564-3490 www.sos.ky.gov				
Pursuant to the provisions of KR business entity named below an	d, for that purpose,	submits the following		wal on behalf of the
1. The name of the business en	tity is RESOLUTE	FEDERAL, INC.		
1. The hame of the basiness on	(The name mu	ust be identical to the na	ame on record with the	Secretary of State.)
2. The state or country of forma	tion is Delaware			·
3. The Secretary of State may for		ness entity at the follow	ring street address an	v process served
on the Secretary of State and				
298 Messner Dr		Wheeling	IL	60090
Street Address (No Post Office Bo	ox Numbers)	City	State	Zip Code
4. The business entity is not train the Commonwealth or pursua authority from the commissioner5. The business entity revokes	nt to KRS 14A.9-01 of the Department	10(7) the business enti of Insurance.	ty is a foreign insurer	with a certificate of
appoints the Secretary of State a during the time it was authorized of State in the future of any char	as its agent for served to transact busine	vice of process in any person in the Commonweal	proceeding based on	a cause of action arising
6. This application will be effecti	ive upon filing.			
I declare under penalty of perjury		Kentucky that the forg	going is true and corre	ect.
Genes M. Hacq	8	James M. Haeger	, Jr.	3/5/2025
Signature of Authorized Represer	ntative	Printed Name		Date