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Michael G. Adams Kentucky Secretary of State Received and Filed:

Received and Filed: 8/19/2024 1:59 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		of Withdrawal usiness Entity)		WFE
Pursuant to the provisions of KR business entity named below and				al on behalf of the
1. The name of the business en	tity is CM & F Group			
	(The name must	t be identical to the na	me on record with the	Secretary of State.)
2. The state or country of format	tion is New York			
The Secretary of State may for on the Secretary of State and	orward to the busines			
5 Bryant Park, 4th Floor		New York	NY	10018
Street Address (No Post Office Bo	x Numbers)	City	State	Zip Code
 The business entity is not trar in the Commonwealth or pursuar authority from the commissioner The business entity revokes appoints the Secretary of State aduring the time it was authorized of State in the future of any chan 	nt to KRS 14A.9-010 of the Department of the authority of its re as its agent for service to transact business	(7) the business entit f Insurance. gistered agent to acc e of process in any p in the Commonweal	y is a foreign insurer w ept service of process roceeding based on a	on its behalf and cause of action arising
6. This application will be effecti	ve upon filing.			
I declare under penalty of perjun	noth	Richard J.J Sulli		7/31/2024
Signature of Authorized Represen	itative	Printed Name		Date