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Michael G. Adams Kentucky Secretary of State Received and Filed: 12/1/2022 4:05 PM Fee Receipt: \$40.00

COMMONWEALTH OF KENTUCKY MICHAEL 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 and KRS 271B, 273, 274, 275, 362 or 38 siness entity named below and, for that purpos	
1. The name of the business en		
The state or country of formal The Secretary of State may format	(The name must be identical to the name on recotion is DE private to the business entity at the following str	·
	d commits to notify the Secretary of State of any	
445 S Main Street	Walworth WI	53184
Street Address (No Post Office Box N	umbers) City State	Zip Code
in the Commonwealth or pursuar 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 chan 6. This application will be effecti	the authority of its registered agent to accept se is its agent for service of process in any procee to transact business in the Commonwealth. Th	foreign insurer with a certificate of ervice of process on its behalf and ding based on a cause of action arising e business entity shall notify the Secretary and/or time is provided. The effective date
l declare under penalty of perjury	under the laws of Kentucky that the forgoing is	
1 megh	Dana Mecum	11/28/2022
Signature of Authorized Representative	e Printed Name	Date