Filing Fee: \$50.00

ID Number: 000561154

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State Division of Business Services 148 W. River Street Providence, Rhode Island 02904-2615

MAY 3 0 2013

FILED

BUSINESS CORPORATION

y pm

APPLICATION FOR CERTIFICATE OF WITHDRAWAL

Pursuant to the provisions of Section 7-1.2-1412 of the General Laws of Rhode Island, 1956, as amended, the undersigned corporation hereby applies for a Certificate of Withdrawal from the State of Rhode Island, and for that purpose submits the following statement:

1. The name of the corporation is Lockton Risk Services, Inc.

2. It is incorporated under the laws of Kansas

3. It is not transacting business in the state of Rhode Island.

4. It hereby surrenders its authority to transact business in the state of Rhode Island.

- 5. It revokes the authority of its registered agent in this state to accept service of process, and consents the service of process in any action, suit, or proceeding based upon any cause of action arising in this state during the time the corporation was authorized to transact business in this state may subsequently be made on the corporation by service thereof on the Secretary of State of the State of Rhode Island.
- The post office address to which the Secretary of State may mail a copy of any process against the corporation is served on the Secretary of State: c/o William W. Humphrey, III, 444 West 47th Street, Suite 900, Kansas City, MO 64112

7. As required by Section 7-1.2-1413 of the General Laws, the corporation has paid all fees and taxes.

- 8. If the corporation is in the hands of a receiver or trustee, this Application for Certificate of Withdrawal must be executed on behalf of the corporation by the receiver or trustee.
- 9. This Application for Certificate of Withdrawal shall be effective upon filing unless a specified date is provided which shall be no later than the 90th day after the date of this filing

Under penalty of perjury, I declare and affirm that I have examined this Application for Certificate of Withdrawal, including any accompanying attachments, and that all statements contained herein are true and correct.

12/27/12 Date:

Signature of Authorized Officer of the Corporation

William W. Humphrey, III, Executive Vice President Type or Print Name of Authorized Officer



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS DEPARTMENT OF ADMINISTRATION DIVISION OF TAXATION ONE CAPITOL HILL PROVIDENCE, RI 02908

DIANNA WOOD 3500 ONE KANSAS CITY PLACE 1200 MAIN STREET KANSAS CITY, MO 64105

LETTER OF GOOD STANDING

It appears from our records that LOCKTON RISK SERVICES INC has filed all the required returns due to be filed and paid all taxes indicated thereon and is in good standing with this Division as of **05/03/2013** regarding any liability under the Rhode Island Business Corporation Tax Law.

This letter is issued pursuant to the request of the above named corporation for the purpose of:

WITHDRAWAL FOR SECRETARY OF STATE

Very truly yours,

JN. Kh

David M. Sullivan Tax Administrator

Steven A. Cobb, Chief Revenue Agent Office Audit and Discovery

48531987:10413219 DLN: 0166908001



State of Rhode Island and Providence Plantations



A. Ralph Mollis Secretary of State

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

I, A. RALPH MOLLIS, Secretary of State of the State of Rhode Island

and Providence Plantations, hereby certify that this document, duly executed in accordance with the provisions of Title 7 of the General Laws

of Rhode Island, as amended, has been filed in this office on this day:

A. ' apr loceio

A. RALPH MOLLIS Secretary of State

