

F02000004950

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

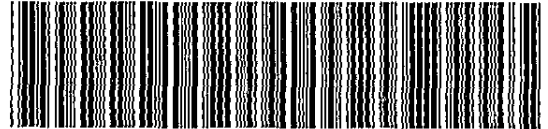
(Business Entity Name)

(Document Number)

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R.A. Charge

G. Ouellette DEC 27 2005



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032
REFERENCE : 635361 4324596
AUTHORIZATION : *Squibb*
COST LIMIT : \$ 95.00

ORDER DATE : October 5, 2005
ORDER TIME : 1:44 PM
ORDER NO. : 635361-120
CUSTOMER NO: 4324596

CHANGE OF AGENT

NAME: REBSAMEN INSURANCE, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
 PLAIN STAMPED COPY

CONTACT PERSON: Sara Lea

EXAMINER'S INITIALS: _____

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Arkansas in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: REBSAMEN INSURANCE, INC.
2. The principal office address: 1500 Riverfront Drive, Little Rock, AR 72202
3. The mailing address (if different): P.O. Box 3198, Little Rock, AR 72203
4. Date of incorporation/qualification: 09/30/2002 Document number: F02000004950
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

C T Corporation System
1200 South Pine Island Road
Plantation, FL 33324

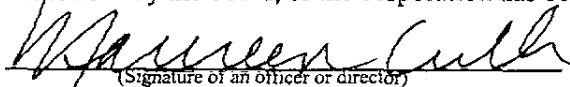
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Corporation Service Company
1201 Hays Street
(P.O. Box NOT acceptable)
Tallahassee, FL 32301

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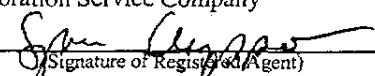
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.


(Signature of an officer or director)

Maureen Cullen, Attorney in Fact
(Printed or typed name and title)

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

Corporation Service Company
By: 
(Signature of Registered Agent)

December 20, 2005
(Date)

If signing on behalf of an entity:

Sylvia Queppet, Asst. Vice President
(Typed or Printed Name)

*** FILING FEE: \$35.00 ***