

F070000000719

Florida Department of State
Division of Corporations
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TALLAHASSEE, FLORIDA

REGISTERED AGENT CHANGE

ALLIANZ LIFE AND ANNUITY COMPANY

RECEIVED
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ADP
8/6/09

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 MN in order to change its registered office or registered agent, or both, in the State of Florida.

- 1. The name of the corporation: ALLIANZ LIFE AND ANNUITY COMPANY
2. The principal office address: 5781 GOLDEN HILLS DR. MINNEAPOLIS MN 55416
3. The mailing address (if different):
4. Date of incorporation/qualification: 02/05/2007 Document number: P07000000719
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State (if resigned, enter resigned)

NUZZO, VICKIE
100 MOUNTAIN PARKWAY
ST. PETERSBURG FL 33716 US

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

C T Corporation System
c/o C T Corporation System, 1200 South Pine Island Road
P.O. Box NOT acceptable
Plantation, Florida 33324

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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]
Signature of the officer or officer

Julius Davidson Asst. Secretary
Typed 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.

By: C T Corporation System
[Signature]
Signature of Registered Agent

8/5/09
Date

If signing on behalf of an entity:
Jeanne Nelson
Assistant Secretary
Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR23045 (1/03)

8/06/09

CORPORATE DETAIL RECORD SCREEN

10:04 AM

NUM: F0760000719 ST:MN ACTIVE/FOREIGN PROF FLD: 02/05/2007

LAST: NAME CHANGE AMENDMENT FLD: 01/16/2009

FEI#: NOT APPLICABLE

NAME : ALLIANZ LIFE AND ANNUITY COMPANY

NH: 1

PRINCIPAL: 5701 GOLDEN HILLS DR.

CHANGED: 04/30/08

ADDRESS MINNEAPOLIS, MN 55416

RA NAME : NUZZO, VICKIE

RA ADDR : 100 FOUNTAIN PARKWAY

ST. PETERSBURG, FL 33716 US

ANN REP : (2008) W 04/30/08 (2009) W 03/19/09

1. MENU, 3. OFFICERS, 4. EVENTS, 6. NAMES

ENTER SELECTION AND CR: