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COR AMND/RESTATE/CORRECT OR O/D RESIGN ING U.S., INC.

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4/7/2014

COVER LETTER

TO:	Amendment Section Division of Corporations	
\$UBJ	FECT: ING U.S., Inc.	of Corporation
DOC	UMENT NUMBER: F09000005039	
	nclosed Amendment and fee are subr	nitted for filing.
	e return all correspondence concernin	
	•	•
	Name of Contact Person	· · · · · · · · · · · · · · · · · · ·
	Firm/Company	
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	elson@us.ing.com B-mail address; (to be used for future an	nual report notification)
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Ame Divi: P.O.	ling Address: ndment Section sion of Corporations Box 6327 almssee, FL 32314	Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

PROFIT CORPORATION APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO APPLICATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

(Pursuant to s. 607.1504, F.S.)

SECTION I (1-3 must be completed)

F09000005039

(Decument number of corporation (If known)					
L ING U.S., Inc.					
1,110 0.05,110.	(Name of corporation as it appears of	in the records of the Department of State)	<u></u>		
2. Delaware					
(Inco:	neis in Florida)				
		•			
	SEC	TION II	> 2 2 2 2 2 2 2 2 2 2		
	(4-7 COMPLETE ONLY 1	THE APPLICABLE CHANGES)	APR T		
4. If the amendment che	mges the name of the corporation	n; when was the change effected un	der the laws of		
its jurisdiction of inc	orporation? 04/07/2014	<u> </u>			
5, Voya Financial, Inc.		iffix "corporation," "company," or	"incorporated," or		
business in Florida) 6. If the amendment ob	anges the period of duration, ind	icate new period of duration.			
	(Net	v duration)			
7. If the amendment ch	anges the jurisdiction of incorpo	ration, indicate new jurisdiction.			
	(New	Jurisdiction)			
8. Attached is a certific 90 days prior to delin having custody of co	ate or document of similar impovery of the application to the Dep porate records in the jurisdiction	rt, evidencing the amendment, auth partment of State, by the Secretary on n under the laws of which it is inco	enticated not more than of State or other official operated.		
Quel 1	- Ogu-				
of a tessiver or	trector, iffesidest or other officer - If in other court appointed fiduciary, by that				
Jennifer M. Ogren	inted name of person signing)	Asst. Secretary (Title of person sig	mina)		
(1 Aheo or h	mirror merge or because stillumitity.	/ 1 tité nà futient eff	P111-92-/		

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THAT THE SAID "ING U.S., INC.", FILED A CERTIFICATE OF OWNERSHIP, CHANGING ITS NAME TO "VOYA FINANCIAL, INC.", THE THIRD DAY OF APRIL, A.D. 2014, AT 5:25 O'CLOCK P.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE EFFECTIVE DATE OF THE AFORESAID CERTIFICATE OF OWNERSHIP IS THE SEVENTH DAY OF APRIL, A.D. 2014, AT 12:01 O'CLOCK A.M.

8026651 8320

140436510

at corp.delaware.cov/authror.shtml

Jeffrey W. Bullock, Secretary of State

DTHENTICATION: 1271862

DATE: 04-07-14