H06472

CT CORPORATION SYSTEM

CORPORATION(S) NAME		LLAHASSEE. F	FILED
(1) Aetna Health Management	, Inc.	SEE. PA	∂
(2) Aetna U.S. Healthcare, Inc		FLOOP 2:	
(3) Prudential Health Care Pla	n, Inc.	JOAN TO A	
(4) Aetna InsuranceCompany	of Connecticut		
(5) Aetna Health and Life Insu	rance Company		
(6) Corporate Health Insurance	e Company		
		300004464325 -07/09/0101040- ******35.00 ***	3——4 -019 *35.00
() Profit () Nonprofit	() Amendment	() Merger	
() Foreign	() Dissolution/Withdrawal () Reinstatement	() Mark	
O Emited Partnership O EDE STORY O CONTROL O	() Annual Report () Name Registration () Fictitious Name () Photocopies	() Other () Change of RA () UCC () CUS	
Call When Ready (xb Walk (2) S	() Call If Problem () Will Wait	() After 4:30 (x) Pick Up	
Name Availability	7/9/01	Order#: 4457363	•
Document Examiner Updater Verifier W.P. Verifier	& COUL	Ref#:	

660 East Jefferson Street Tallahassee, FL 32301 Tel. 850 222 1092 Fax 850 222 7615



Florida Department of State, Sandra B. Mortham, Secretary of State

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

Pursuant to the provisions of sections 607.0502, 617.0 undersigned corporation organized under the laws of the section of the	502, 607.1508, or 617.1508, Florida Statutes, the
submits the following statement in order to change its re State of Florida.	
1. The name of the corporation is: Aetna U.S. Healthcare, I	nc.
	- · ·
2. The mailing address of the corporation is: 980 Jolly Ro	ad, P.O. Box 1109, Blue Bell, PA 19422
3. Date of incorporation/qualification: 6/4/84	Document number: H06472
4. The name and address of the current registered agent a	and office:
The Prentice-Hall Corporation System, Inc.	ARE JE
110 N. Magnolia Street	HASSEE
Tallahassee, Florida 32301	
5. The name and address of the new registered agent and	office: (P. O. Box Not Acceptable)
C T Corporation System	RID,
c/o C T Corporation System, 1200 South Pine	E Island Road
Plantation, Florida 33324	
The street address of its registered office and the street agent, as changed, will be identical.	address of the business office of its registered
Such change was authorized by resolution duly adopte authorized by the board.	d by its board of directors or by an officer so
- Yaler L Faller	6/22/01
(Signature of an officer, chairman or vice chairman of	
Paige L. Falasco, Assistant Secretary	6 / 22/2001
(Printed or typed name and title)	(Date)
Having been named as registered agent and to accept corporation, I hereby accept the appointment as regis I further agree to comply with the provisions of all staperformance of my duties, and I am familiar with and registered agent.	service of process for the above stated tered agent and agree to act in this capacity. tutes relative to the proper and complete accept the obligation of my position as
(Signature of Registered Agent) If signing on behalf of an entity:	ALVINA AMENTA-GRAY AL ASSISTANT SECRETARY
(Typed or Printed Name)	(Capacity)
CR2E045(4/95)	FILING FEE: \$35.00