## P06309

(Requestor's Name)
(Address)
(Address)
( ladioss)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
***
(Business Entity Name)
(
(Document Number)
Certified Copies Certificates of Status
Casalal Instructions to Filling Officers
Special Instructions to Filing Officer:

Office Use Only



700038127507

06/30/04--01017--016 \*\*35.00

The Tileurs





Gina R. Wardlow, Esq.

Manager, Compliance Prudential Retirement

The Prudential Insurance Company of America

200 Wood Avenue, S, Iselin NJ 08830 Tel 732 482-6301 Fax 732 482-8034 gina.wardlow@prudential.com

June 29, 2004

Via Overnight Mail Florida Division of Corporations Amendment Section 409 East Gaines Street Tallahassee, FL 32399

RE: Name Change of an Authorized Insurer
CIGNA Life Insurance Company to Prudential Retirement Insurance
and Annuity Company

NAIC#: 93629

Dear Sir or Madam:

Please be advised that CIGNA Life Insurance Company ("CIGNA Life") intends to change its name to Prudential Retirement Insurance and Annuity Company due to the recent acquisition of CIGNA Life by Prudential Financial, Inc. and The Prudential Insurance Company of America. The transaction was approved by the Connecticut Insurance Department, CIGNA Life's state of domicile. The name change was approved by the Connecticut Insurance Department and the State of Connecticut, Office of the Secretary of the State effective April 20, 2004.

The following documents are enclosed in support of the name change application:

- Completed Florida Transmittal Letter;
- Completed form titled "Application by Foreign Profit Corporation to File Amendment to Application for Authorization to Transact Business in Florida" required by your Department;
- Certified copy of the Amendment to the Articles of Incorporation of CIGNA Life reflecting the new name;
- Filing fee in the amount of \$35.00 (Check No 3050118747); and
- Self-addressed envelope for the issuance of the amended Florida Certificate of Status.

In an effort to effect a seamless transition of the name change in all 50 states and the District of Columbia, the intended date for use of the new name in Florida is August 1, 2004. Accordingly, we respectfully request an expedited review of the application.

Should you have any questions regarding this application, please contact me at (732) 482-6301.

Regards.

Gina R. Wardlow

## 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 COMPLE	ETED)
(Document number of corporation	on (if known))
1. CIGNA Life Insurance Company (Name of corporation as it appears on the record	ls of the Department of State)
2. Connecticut 3. J (Incorporated under laws of)	une 4, 1985 (Date authorized to do business in Florida)
SECTION II (4-7 complete only the appli	CABLE CHANGES)
4. If the amendment changes the name of the corporation, when was its jurisdiction of incorporation? <u>April 20, 2004</u>	the change effected under the laws of
5. Prudential Retirement Insurance and A (Name of corporation after the amendment, adding suffix "corpora appropriate abbreviation, if not contained in new name of the corporation."	nnuity Company ition," "company," or "incorporated," or poration)
N/A (If new name is unavailable in Florida, enter alternate corporate na business in Florida)	me adopted for the purpose of transacting
6. If the amendment changes the period of duration, indicate new per	iod of duration.
N/A (New duration)	
7. If the amendment changes the jurisdiction of incorporation, indicate	te new jurisdiction.
N/A (New jurisdiction)	
(Signature of a director, president or other officer - if in the hands	(Date)
of a receiver or other court appointed fiduciary, by that fiduciary)  Stephen E. Wieler  (Typed or printed name of person signing)	Secretary (Title of person signing)

## CERTIFICATE OF AMENDMENT STOCK CORPORATION Office of the Secretary of the State 30 Trimity Street / P.O. Box 150470 / Hartford, CT 06115-0470 / Rev. 07/01/2003

		FILED 04/20/2004 SECRETAR	01 OF 03 VOL B-00649 04:00 PM PAGE 03623 IT OF THE STATE TARY OF THE STATE
1. NAME OF	CORPORATION		
CIGNA Life	Insurance Company		
2. THE CERT	FICATE OF INCORPORAT	ION IS (check A, B or C)	
X A. A.	MENDED	· · · · · · · · · · · · · · · · · · ·	
B. R	ESTATED		
C. A	MENDED AND RESTATED		
The restated 3. TEXT OF E	certificate consolidates all amen ACH AMENDMENT / RESTA	dments into a single document	<u>L</u>
the Compa Annuity Co RESOLVED:	That Section 1 of the R my is amended to change 1 ompany.  That Section 1 of the R amended to read in its en	ts name to Prudential Re estated Certificate of I	etirement Insurance and
a body grante	on I. iThe Prudential Ret politic and corporate an d by the general statutes ations formed under the C	d under that name shall, , as now enacted or here	have all the powers
	W by tappage-middlesidesidesidesidesidesidesidesidesidesid		THE THE THREE CONTINUES OF THE THE THREE THE THREE THE THREE
	•		
			***************************************
	And the second of the second o		

FILING \$0002719300 PG 02 OF 03 WOL B-00649
FILED 04/20/2004 04:00 PH PAGE 03624
CONNECTICUT SECRETARY OF THE STATE

4. VOTE INFORMATION (check A, B or C)

X A. The amendment was approved by shareholders in the manner required by sections 33-600 to 33-998 of the Connecticut General Statutes, and by the Certificate of Incorporation.

B. The amendment was approved by the incorporators.

No shareholder approval was required.

C. The amendment was approved by the board of directors.

No shareholder approval was required.

5. EXECUTION

Dated this 3/5+ day of March 20 04

Tohn Y. Kim Pre Sident

Print or type name of signatory Capacity of signatory Signature

FILING #0002719300 PG 83 OF 83 VOL B-80649 FILED 04/20/2004 04:00 PM PAGE 03625 SECRETARY OF THE STATE CONNECTICUT SECRETARY OF THE STATE



## tate of Connecticular Insurance Department

This is to Certify, that the Amendment to the Restated Certificate of Incorporation of CIGNA Life Insurance Company, with respect to the change of name to Prudential Retirement Insurance and Annuity Company, has been reviewed and approved.

Witness my hand and official seal, at HARTFORD,

this 5th day of April, 2004

Ausan F. Coowede

OFFICE OF THE SECRETARY OF THE STATE \$5. HARTFORD STATE OF CONNECTICUT

I hereby certify that this is a true copy of record in this Office

In Testimony whereof, I have hereunto set my hand, and affixed the Shal of said State, at Hartford, this \_\_\_\_\_ day of \_\_\_\_\_ A.D. 2004