



ACCOUNT NO.

072100000032

REFERENCE ::

AUTHORIZATION

COST LIMIT

\$ 35.00

ORDER DATE: March 5, 2002

ORDER TIME :

10:16 AM

ORDER NO. :

430715-025

CUSTOMER NO:

4718027

700005110287

CUSTOMER:

Margaret Weber, Legal Asst

Wells Fargo & Company East

Mac #n9305-173

Sixth & Marquette Avenue Minneapolis, MN 55479

CHANGE OF AGENT

NAME:

ACORDIA NATIONAL, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

PLAIN STAMPED COPY

CONTACT PERSON: Ta-tanisha Adams

C. Coulliste MAR 1 5 2002

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

	e provisions of sections 607.0502, 617.050.		orida Statutes,
_	d corporation organized under the laws of th		
•	lowing statement in order to change its regi	istered office or registered ago	ent, or both, in
the State of Flo	f the corporation:		
	-		
	ATIONAL, INC.		
2. The mailing	address of the corporation : 602 Virginia	Street East	· · · ·
Charlesto	on, WV 25301		
3. Date of inc	orporation/qualification: June 16, 1987	Document number:	P14869
4. The name a	nd address of the current registered agent ar	nd office:	
	CT Corporation System	· · · · · · · · · · · · · · · · · · ·	2002 SEC
	1200 South Pine Island Road	<u> </u>	
	Plantation, FL 33324		FII R I S R ASS
5. The name a	nd address of the new registered agent (if cl (P. O. BoxNot Acce	hanged) and/or registered offi ptable)	
	Corporation Service Company		2: 2; TATE ORID
	1201 Hays Street		
	Tallahassee, FL 32301		r that is set
	lress of its registered office and the street a ged, will be identical.		
Such change vauthorized by	was authorized by resolution duly adopted by the board.	by its board of directors or by	y an officer so
Margaret Do Valuer 3/8/02			
(Signath)	re of an officer, chairman or vice chairman of the board)	(I	Date)
Margare	+M. Weber Assl. Secre (Printed or typed name and title)	etary	₹ ·
corporation, I further agree performance of registered age Corporation	named as registered agent and to accept ser hereby accept the appointment as registere to comply with the provisions of all statute of my duties, and I am familiar with and accept ent. Service Company (Signature of Registered Agent)	ed agent and agree to act in the es relative to the proper and c	ns capacity. complete
If signing on beh	nalf of an entity:		
Maureen W. C	ullen (Typed or Printed Name)	Assistant Vice Presi (Capacity)	dent
	* * * FILING FEE: \$		

CR2E045(9/00)