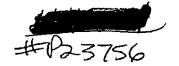
FILED Jun 22, 2004 8:00 am Secretary of State

1. Entity Nam	e	# P237 CE COMP.		TED	- Ex					06-01-200	90001	037 ***	**70.00
Principal Place PO BOX 1821 VICTORIA HAI HAMILTON H	6 Ll M HX, Beri	MUDA,	ВА	PO BO VICTO HAMIL	Address DX 1826 RIA HALL TON HM HX, BER	RMUDA,	B	BA					
2. Principal P			•		ng Address 30x <u> 1051 </u>	.1							
Suite, Apt. #, etc.					Suite, Apt. #, etc.				06 01 00 03152003 C	ሊ <i>ዒሀዐ</i> hg-NP	CR2E037		190-00
FIRST CARIBBEAN HOUSE. 3RD FLOOR.					CACIBBEAN & State	HOUSE	. SRD F	100£.	4. FEI Number			·	plied For
	LDOW ROAD GRAND CAMAN				SHEDDEN ROAD. GRAND			A i	NOT APPLI	IĊABLE			Applicable
Zip		Country		Zip		Cou	intry T		5. Certificate of Si	tatus Desired		8.75 Add	
	6. Name	O and Address	URANM of Current F	l legistered	i Agent	Cua M	121 IV	'thrin	7. Name and Add	iress of New R			<u>' </u>
MADTIN				<u> </u>			Name					 -	
MARTIN, J 4500 SAN JACKSON	•				Street Address (P.O. Box Number is Not Acceptable)								
	r - GTT-r-				د میسینی د			•					5 # 4 A
							City			_	FL	Zip Code	,
		ity submits this stered agent.	statement for	the purpo	se of changing its	registere	ed office o	r registe	red agent, or both, in	the State of Flo	rida. I am fa	miliar with,	and accept
SIGNATURE.												· · · · · · · · · · · · · · · · · · ·	
	Signature, type	d or printed name o	registered agent a	nd title if appli	icable. (NOT	E: Registere	d Agent signe.	ture require	d when reinstating)	Telephone in the contract of t	DATE		and the second second
Filing Fee is \$61.25 9. Election Campaign Due by September 8, 2004 Trust Fund Contrib									\$5.00 May Be Added to Fees		ake check ida Departr		
10.		OFFIC	ERS AND DIR	ECTORS		11.			ADDITIONS/CHANG	ES TO OFFICE			
TITLE MAME	PD HERREL	L, JOHN H.			Datete	TITLE		PD ROLT	on, TEFFREY	١		Change	Addition
STREET ADDRESS 200 FIRST ST SW					STREE				FIRST ST SW				
CITY-ST-ZIP		STER, MN	-				-ST-ZIP		<u>HESTER, MN</u>	<u>, </u>			
TITLE NAME	AT FRIEND.	DAVID			Delete	TITLE		TD	MAN, HARES	,		Change	☐ Addition
STREET ADDRESS 11 VICTORIA HALL, VICTORIA STREET							ET ADDRESS		FIRST ST				
CITY-ST-ZIP		ON, BERMUI			CITY	-ST-ZIP	ROCH	HESTER, MA	J				
TITLE NAME	S	UC CTEVE	NI.		Delete	TITLE		20				La Change	☐ Addition
STREET ADDRESS	- 15	IUG, STEVEI ST ST SW	•			NAM STRE	ET ADDRESS		HAUG, STEVE FIRST ST SW	~	21	direct	(10
CITY-ST-ZIP	ROCHES	STER, MN				CITY	-\$T-ZIP	1.7	CITCH, MN				_′
TITLE	V	1011111			☐ Delete	1/JL		VD				Change	☐ Addition
NAME STREET ADDRESS		, JOANNE L ST ST SW				NAM STRE	EET ADDRESS	1 -	IN, TORNO	it L	1		
CITY-ST-ZIP		STER, MN					-ST-ZIP		first st sw hester, mn		(Îı	direct	01)
TITLE	AS				Delete	mu	Ε	AS				Спалра	Addition
NAME STREET ADDRESS		CATHRYN ERE BLDG				- NAM	-		TT TONATH			,	
CITY-ST-ZIP		ON, BERMU!	DA HMC.				EFT ADDRESS '-ST-ZIP		FIRET ST SW HEJTER MA	•			[
TITLE	Т				Delete	TITLE		AS		`		Change	notifica-
NAME	•	WENDY W			٠.	NAME		1 -	AN, SEAMUS				
STREET ADORESS CITY-ST-ZIP		ST ST SW STER, MN	-				et address -st-zip		floor, first Egriown, g			e. 33-1€4	SOCH CIN
ļ. <u></u>		·	supplied with	this (ilina	does not qualify to	1						y that the in	formation C
indicated of the cor	on this reproporation or	ort or supplem the receiver or	ental report is trustee empo	true and o	accurate and that execute this report	my signa Las requi	ture shall I ired by Ch	have the apter 61	ection 119,07(3)(i), Fl same legal effect as 7, Florida Statutes; ar	if made under onder ond that my name	oath; that I an e appears in	an officer Block 10 or	or director Block 11 if
changed	, or on an at	tachment with	an address, v	WITH BUILDUCK	er like empowered	l.		, -	_				SEPPRA
SIGNAT	1105.			CO	L L.V				17 Em	ו אסטו	.2 4	5 9165	730 Pri-c

attachment 66428809



Box 11 on Form P23756
Entity Mayo Insurance Company Limited

Both the following are additions to the officers (AS = assistant secretary)

TITLE

AS

NAME

Gauld, Chiara

STREET ADDRESS 3rd Floor. First Caribbean House, Shedden Rd, George Town.

Grand Cayman.

TITLE

AS

NAME

Wheeler, Clare

STREET ADDRESS 3rd Floor. First Caribbean House, Shedden Rd, George Town.

Grand Cayman.