805067

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
_		
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
	-	
		•

Office Use Only



000107042290

RECEIVED

OT AUG IL PH 12: 43

OWNER OF CHEFFER ON THE

07 AUG 14 FM 2: 4 SECRETARY OF STAT FALLAHASSEE, FLORE

APPROVED
AND
FILED

R.A. Chorge

C. Coulifette AUG 1 4 2007.



ACCOUNT NO). :	07210000	0032	
REFERENC	E :	051604	4328999	
AUTHORIZATIO)N :	.00		
COST LIMI). T	Zport Sec	ena	
ADDED DAME Avenue 12 200		0		
ORDER DATE : August 13, 200) /			
ORDER TIME : 10:33 AM				
ORDER NO. : 051604-010				
CUSTOMER NO: 4328999				
	-			
CHANGE OF AGENT				
NAME: SEABOARD SU	IRETY	COMPANY	· ·	
PLEASE RETURN THE FOLLOWING CERTIFIED COPY PLAIN STAMPED COPY	AS PR	OOF OF FI	LING:	
CONTACT PERSON: Doreen Wallace				
	EXAMI	NER'S INI	TIALS:	

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this inge is submitted for a corporation organized under the laws of the State of New York
	r to change its registered office or registered agent, or both, in the State of Florida. the corporation: SEABOARD SURETY COMPANY
2. The principal	office address: One Tower Square, Hartford, CT 06183
3. The mailing a	ddress (if different): 385 Washington Street, Mail Code NB15A, St. Paul, MN 55102
4. Date of incor	poration/qualification: 06/10/1939 Document number: 805067
5. The name and	I street address of the current registered agent and registered office on file with the trment of State:
	Chief Financial Officer
	200 E. Gaines Street, P.O. Box 6200 (32314-6200)
	Tallahassee, FL 32399
6. The name and (if changed):	I street address of the new registered agent (if changed) and /or registered office Corporation Service Company 1201 Hays Street
	Corporation Service Company
	1201 Hays Street (P.O. Box NOT acceptable) (P.O. Box NOT acceptable)
	(P.O. Box NOT acceptable)
	Tallahassee, FL 32301
The street address changed will	ess of its registered office and the street address of the business office of its registered agent, be identical.
Such change w authorized by t	as authorized by resolution duly adopted by its board of directors or by an officer so he board, or the corporation has been notified in writing of the change.
Mai	Maureen Cullen, Attorney In Fact (Printed or typed name and title)
I hereby accept I further agree of my duties, an document is be corporation ha Corporation By:	the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and complete performance and I am familiar with and accept the obligation of my position as registered agent. Or, if this ing filed merely to reflect a change in the registered office address, I hereby confirm that the so been notified in writing of this change. A Service Company Market Grant Gr
	chalf of an entity:
	noy, Assistant Vice President
	Typed or Printed Name)

* * * FILING FEE: \$35.00 * * *