2011 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT#818094

FILED Sep 13, 2011 Secretary of State

Entity Name: AMERICAN GENERAL LIFE INSURANCE COMPANY OF DELAWARE

Current Principal Place of Business: New Principal Place of Business:

2929 ALLEN PARKWAY HOUSTON, TX 77019 US

Current Mailing Address: New Mailing Address:

2727-A ALLEN PARKWAY P.O. BOX 1591 HOUSTON, TX 77251 US

FEI Number: 25-1118523 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

INSURANCE COMMISSIONER STATE OF FLORIDA TALLAHASSEE, FL 33131 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: CORPORATION SERVICE COMPANY

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: AS

Name: HEARNE, JULIE
Address: 2727 ALLEN PARKWAY
City-St-Zip: HOUSTON, TX 77019 US

Title: F

Name: FORTIN, MARY JANE B Address: 2929 ALLEN PARKWAY City-St-Zip: HOUSTON, TX 77019 US

Title: S

Name: JENNINGS, KYLE L Address: 2929 ALLEN PARKWAY City-St-Zip: HOUSTON, TX 77019 US

Title: VP

Name: BACON, EDWARD F

Address: 2727-A ALLEN PARKWAY 4-B2 City-St-Zip: HOUSTON, TX 77019 US

Title:

Name: HERBERT, ROBERT F Address: 2727 ALLEN PARKWAY City-St-Zip: HOUSTON, TX 77019 US

Title: CFO

Name: CUMMINGS, DON W
Address: 2929 ALLEN PARKWAY
City-St-Zip: HOUSTON, TX 77019 US

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JULIE HEARNE AS 09/13/2011