

825564

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

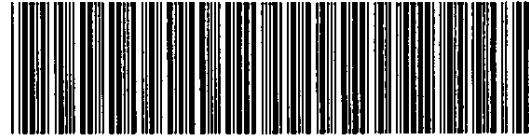
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2013 MAY 17 AM 10:27

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MAY 22 2013

T. LEMIEUX



CORPORATION SERVICE COMPANY

FL

CSC - WILMINGTON  
Suite 400  
2711 Centerville Road  
Wilmington De 19808  
800-927-9800  
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Elizabeth Dawson edawson@cscinfo.com

Date: May 15, 2013

Order#: 645867-003

Re: PRESIDENTIAL LIFE INSURANCE COMPANY

Enclosed please find:

XX Change of Registered Agent and Office.  
XX Check in the amount of \$35.\_\_\_\_.

Please take the following action:

XX File in your office on a routine basis.  
XX Issue Proof of Filing.  
XX Please return evidence to the following:

Attn: Elizabeth Dawson  
c/o Corporation Service Company  
2711 Centerville Road, Suite 400  
Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of New York in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: PRESIDENTIAL LIFE INSURANCE COMPANY

2. The principal office address: \_\_\_\_\_  
69 Lydecker St., Nyack, NY 10960

3. The mailing address (if different): \_\_\_\_\_

4. Date of incorporation/qualification: 12/31/1970 Document number: 825564

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Amyx Insurance Services Inc.

4175 East Bay Drive

Clearwater, FL 33762

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Chief Financial Officer

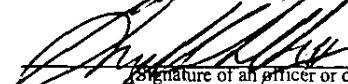
P. O. Box 6200 (32314-6200), 200 E. Gaines St.

(P.O. Box NOT acceptable)

Tallahassee, FL 32399

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

  
(Signature of an officer or director)

Guy Hudson Smith, III, President

(Printed or typed name and title)

*I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.*

Corporation Service Company

By: 

(Signature of Registered Agent)

5/13/2013

(Date)

If signing on behalf of an entity:

Elizabeth A. Dawson, Asst. Vice President

(Typed or Printed Name)

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE  
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

CR2E045 (8/05)

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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