



August 3, 2001

Florida Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

RE: The Excess and Special Risk Market, Inc.

Fireman's Fund Risk Management Services, Inc.

Structured Security Company, Inc. Crop Growers Insurance Services, Inc. Fireman's Fund Agribusiness, Inc.

Agent for Service of Process

300004528333--7 -08/10/01--01038--004 ****175.00 *****35.00

Dear Sir/Madam:

Enclosed please find a Statement of Change forms for the above noted companies, together with check 1807279 in the amount of \$175.00 to cover the required \$35.00 per company filing fee.

I would appreciate your records being changed to reflect this new information, and confirmed by returning to me the attached copy letter. A stamped self-addressed envelope is enclosed for your convenience.

Yours truly,

Noreen France

Corporate Secretary's Office

FILED

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SECRETARY OF STATE
SECRETARY OF STATE

enclosure

cc: B. Kushner

777 San Marin Drive Novato, CA 94998 Phone 415.899.2000

2.A. Charge

Allianz Group

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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, |
|--|
| the undersigned corporation organized under the laws of the State of California |
| submits the following statement in order to change its registered office or registered agent, or both, in |
| the State of Florida. |
| 1. The name of the corporation: The Excess and Special Risk Market, Inc. |
| |
| 2. The mailing address of the corporation: 777 San Marin Drive |
| |
| Novato CA 94998 |
| 3. Date of incorporation/qualification: 03/27/73 Document number: 829797 |
| 4. The name and address of the current registered agent and office: |
| Betsy L. Kushner, Fireman's Fund Insurance Companies |
| 5310 Cypress Center Drive |
| |
| 5. The name and address of the new registered agent (if changed) and/or registered office (if changed): |
| (P. O. Box Not Acceptable) |
| Betsy L. Kushner, Fireman's Fund Insurance Companies |
| |
| 4301 Anchor Plaza Parkway |
| Tampa FT, 33634 |
| 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. |
| additionized by the obard. |
| (Signature of an officer, chairman of vice chairman of the board) (Date) |
| (Date) |
| Julie A. Garrison ASS, SIC. |
| (Printed or typed name and title) |
| Having been named as registered agent and to accept service of process for the above stated corporation, 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. |
| 1 est 8/6/01 |
| (Signature of Registered Agent) (Date) |
| If signing on behalf of an entity: |
| Betsy L. Kushner (Typed or Printed Name) (Canacity) |
| (Capacity) |
| * * * FILING FEE: \$35.00 * * * |

CR2E045(9/00)

DIVISION OF CORPORATIONS

P.O. Box 6327

TALLAHASSEE, FL 32314

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