# 837140

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Office Use Only

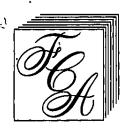


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SECRETARY OF STATE ON SECRETARY OF CORPORATIONS

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### FIRST CONSULTING & Administration, Inc.

January 7, 2008

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

RE:

American Skandia Life Assurance Corporation (renamed as Prudential Annuities Life

Į.

Assurance Corporation)

NAIC # 86630 FEIN # 06-1241288

Our File # 4823

Dear Sir or Madam:

Effective January 1, 2008, American Skandia Life Assurance Corporation changed its name to Prudential Annuities Life Assurance Corporation.

In addition to the executed Amendment Application, I am enclosing the following:

- 1. Two certified copies of Amendment to Certificate of Incorporation.
- 2. Check in the amount of \$52.50 for the required fee.

I have also enclosed an authorization letter concerning the name change. During the name change process, should you require anything further to update and complete your records concerning the name change, please forward the correspondence and/or forms to:

First Consulting & Administration, Inc. 1020 Central, Suite 201 Kansas City, MO 64105-1670 Attn: Scott Sheffer, ext. 2742 Telephone (816) 391-2742, (800) 927-2730 Fax: (816) 391-2755

Email: scott.sheffer@firstconsulting.com

Thank you in advance for your help in this matter.

Sincerely,

FIRST CONSULTING & ADMINISTRATION, INC.

Scott Sheffer

Associate Consultant Writer's Extension: 2742

E-mail: scott.sheffer@firstconsulting.com

# PROFIT CORPORATION APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO APPLICATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

(Pursuant to s. 607.1504, F.S.)

	SECTION I (1-3 must be compl	.ETED)	Q
	837140		08 五至
	(Document number of corporat	ion (if known)	
ı.American Skandia Lif	·		
(Name of co	rporation as it appears on the recor	ds of the Department of State)	
2. Connecticut	3.	10/05/1976 (Date authorized to do business in Florida)	
(Incorporated under	laws of)	(Date authorized to do business in Florida)	
(4-7	SECTION II COMPLETE ONLY THE APPLI	ICABLE CHANGES)	
		vas the change effected under the laws of	
its jurisdiction of incorporation?	January 1, 2000	<del></del>	
5. Prudential Annuities L	<u>ife Assurance Cor</u>	poration	
appropriate abbreviation, if not c	endment, adding surfix "corp ontained in new name of the	poration," "company," or "incorporated," or corporation)	
(If new name is unavailable in Flor business in Florida)	ida, enter alternate corporate	name adopted for the purpose of transacting	<del></del> ;
6. If the amendment changes the peri	od of duration, indicate new	period of duration.	
N/A	1		
<del></del>	(New duration)		
7. If the amendment changes the juris N/A	<b>\</b>		
0. A4411'	(New jurisdiction	•	_
90 days prior to delivery of the app having custody of corporate record	dication to the Department of	ing the amendment, authenticated not more to f State, by the Secretary of State or other office laws of which it is incorporated.	han icial
(Signature of a director, president of a receiver or other court appoin	or other officer - if in the hands nted fiduciary, by that fiduciary)		
Jacob M. Herschler		Senior Vice President	
(Typed or printed name of pe	rson signing)	(Title of person signing)	



American Skandia Life Assurance Corporation
One Corporate Drive
P.O. Box 883
Shelton, CT 06484-0883
Telephone (203) 926-1888

September 10, 2007

To: Insurance Commissioner

Re: Limited Authorization To Represent American Skandia Life Assurance Corporation

American Skandia Life Assurance Corporation ("American Skandia"), a licensed insurance company in your state, is changing its name to Prudential Annuities Life Assurance Corporation effective January 1, 2008.

This letter, or a copy hereof, serves as notification to you that the consulting firm of First Consulting & Administration, Inc. of Kansas City, Missouri, and its employees are authorized on behalf of American Skandia to submit filings, supporting documentation and other related activities necessary to obtain the approval of the above name change.

American Skandia Life Assurance Corporation

By: Suzanne Hurel

Title: VP Contracts

## CERTIFICATE OF AMENDMENT STOCK CORPORATION

Office of the Secretary of the State

30 Trinity Street / P.O. Box 150470 / Hartford, CT 06115-0470 /Rev. 07/01/2003

Space	FILING #0003486345 PG 01 OF 03 VOL B-01056 FILED 06/29/2007 03:00 PM PAGE 02058 SECRETARY OF THE STATE CONNECTICUT SECRETARY OF THE STATE
1. NAME OF CORPORATION	
American Skandia Life Assurance Corporation	
2. THE CERTIFICATE OF INCORPORAT	FION IS (check A, B or C)
× A. AMENDED	·
B. RESTATED	
C. AMENDED AND RESTATED	
\ <del></del>	
The restated certificate consolidates all ame  3. TEXT OF EACH AMENDMENT / REST	
The name of the corporation has been changed from Life Assurance Corporation effective as of January 1	American Skandia Life Assurance Corporation to Prudential Amuities 1, 2008.
· ·	
	,
	•
•	
(Please reference an 8 1/2 X	11 attachment if additional space is needed)

4. VOTE INFORMATIO	N (check A, B or (	<b></b>			
			e manner required he Certificate of Inc	by sections 33-600 to orporation.	. , ;
B. The amendment	was approved by approval was requ			:	
C. The amendment No shareholder	was approved by approval was requ		ors.		
	5	S. EXECUTION			
Date	ed this 23	day ofMay	, 20_07		
Kathleen M. Gibson	Assistant Secre	tary	Soulile	delle	·, · .
Print or type name of signal	tory Capa	city of signatory	Si	mature	7



#### STATE OF CONNECTICUT

INSURANCE DEPARTMENT

FILING #0003486345 PG 03 OF 03 VOL B-01056 FILED 06/29/2007 03:00 PM PAGE 02060 SECRETARY OF THE STATE CONNECTICUT SECRETARY OF THE STATE

This is To Certify, that the Certificate of Amendment to the Articles of Incorporation of American Skandia Life Assurance Corporation, with respect to the change of name to Prudential Annuities Life Assurance Corporation has been reviewed and approved.

Witness my hand and official seal, at Hartford,

This eleventh day of June, 2007

TI DOM:

Thomas R. Sullivan
Insurance Commissioner

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www.ct.gov/cid
P.O. Box 816 • Hartford, CT 06142-0816
An Equal Opportunity Employer

STATE OF CONNECTICUT
OFFICE OF THE SECRETARY OF THE STATE
SS. HARTFORD

I hereby certify that this is a true copy of recordin this Office

SECRETARY OF THE STATE