## F06000006714

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				
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Office Use Cnly



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SECRETARY OF STATE DIVISION OF CURPORATIONS

C/18/5



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

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Lindsey Lockard llockar2@cscinfo.com

Date: December 31, 2014

Order#: 436571-022

Re: VALIDUS SPECIALTY, INC.

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$35.00.

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: Lindsey Lockard

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

statement of cha	provisions of sections 607.0502, 617 inge is submitted for a corporation o r to change its registered office or r	organized under the la	rws of the State of Delay	ware
1. The name of t	he corporation: VALIDUS SPECIAL	.TY, INC.		
• •	office address:d Road, Pembroke Parish, Bermud			
3. The mailing a	ddress (if different):			
4. Date of incorp	acorporation/qualification: 10/24/2006 Document number: F06000006714			4
	I street address of the current registe tment of State: (If resigned, enter re	-	ed office on file with the	;
	C T Corporation System			
	1200 South Pine Island Road			
	Plantation, FL 33324			NAIO S. S.
6. The name and (if changed):	street address of the new registered	l agent (if changed) an	nd /or registered office	VISION OF COL
	Corporation Service Company			PH 1:5
	1201 Hays Street			-:5
	P.O. Box	NOT acceptable	32301	- *
The street addre	ess of its registered office and the state identical.			stered agent,
Such change wa authorized by the	s authorized by resolution duly add the board, or the corporation has bee			r so
Sign	e of an officer or director	Dona Priebe, V	/ice President ed or typed name and title	
I further agree t performance of agent. Or, if thi hereby confirm	the appointment as registered agen to comply with the provisions of all my duties, and I am familiar with a is document is being filed merely to that the corporation has been notif n Service Company	statutes relative to the and accept the obligate reflect a change in t	he proper and complete tion of my position as re he registered office add	egistered ress, I
By:	in august	12/31/2014	Date	
•	halire of Registered Agent half of an entity:		Date	
	, Asst. Vice President			
	ped or Printed Name			

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