Division of Corporations **Electronic Filing Cover Sheet**

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H120002812163)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6380

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 : (850)222-1092

: (850)878-5368 Fax Number

er the email address for this business entity to be used for future annual report mailings. Enter only one email address please.**

Email Address:

REGISTERED AGENT CHANGE HARTFORD SECURITIES DISTRIBUTION COMPANY, INC.

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

Help

https://efile.sunbiz.org/scripts/efilcovr.exe

11/30/2012

CT CORPORATION

7609889998

11/30/5015 11:21

COVER LETTER

TO: Amendment Section Division of Corporations	
HARTFORD SECURITIES DIS	ETRIBUTION COMPANY, INC.
	Name of Corporation
DOCUMENT NUMBER: FO70	00003573
The enclosed Statement of Change of Reg	ristered Office/Agent and fee are submitted for filing.
Please return all correspondence concerni	ng this matter to the following:
	,
	Name of Contact Person
	Firm/Company
	Address
	City/State and Zip Code
•	
E-mail address: (to be	e used for future annual report notification)
For further information concerning this ma	•
Name of Contact Person	at () Area Code & Daytime Telephone Number
Enclosed is a \$35.00 check made payable to	o the Department of State.
Mailing Address: Amondment Secti	Street Address: Amendment Section
Division of Corpo	prations Division of Corporations
P.O. Box 6327 Tallahassee, FL 3	Clifton Building 2314 2661 Executive Center Circle
a construction of a set of	Tallahasseo, FL 32301

CR2E045 (03/12)

FL006 - 10/23/2012 Walters Kluwer Online

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

	502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this ration organized under the laws of the State of Connecticut
In order to change Its registered off	ice or registered agent, or both, in the State of Florida.
1. The name of the corporation: HARTFORD	SECURITIES DISTRIBUTION COMPANY, INC.
2. The principal office address: 200 HOPME	ADOW ROAD, LAW DEPT. BIE - CORPORATE & M&A
SIMSBURY, CT 06089 US	
3. The mailing address (if different): 200 HO. SIMSBURY, CT 06089 US	PMEADOW ROAD, LAW DEPT. BIE - CORPORATE & M&A
4. Date of incorporation/qualification: 07/02	2007 Document number: F07000003573
5. The name and street address of the current Florida Department of State: (If resigned,	registered agent and registered office on file with the
CORPORATION SERVICE (COMPANY
1201 HAYS STREET	
TALLAHASSEE, FL 32301	
6. The name and street address of the new reg (if changed);	gistered agent (if changed) and /or registered office
C T Corporation System	<u> </u>
c/o C T Corporation System, 1	
	200 South Pine Island Road P.O. Bax NOT ecceptable
Plantation, Florida 33324	
The street address of its registered office and as changed will be identical.	the street address of the business office of its registered agent,
Such change was authorized by resolution di authorized by the board, or the corporation h	aly adopted by its board of directors or by an officer so as been notified in writing of the change.
Shorli Aldos	Sharlin Aldao, Vice President
Signature of an efficie of director I hereby accept the appointment as registered	Printed or typed name and title d agent and agree to act in this capacity.
i Jurther agree to comply with the provisions performance of my duties, and I am familiar agent. Or, if this document is being filed met hereby confirm that the corporation has been	d agent and agree to act in this capacity. of all statutes relative to the proper and complete with and accept the obligation of my position as registered rely to reflect a change in the registered office address, I notified in writing of this change.
By: PComposite Sylven	11/19/2012
Signifured Regulated Active	Date
faigning on behalf of an entity: Kristir	n Bolden
Assistan Typed or Printed Name	t Secretary
	LING FEE: \$35.00 * * *
MAKE CHECKS PAYABI	LE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORA	TIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

FL606 - 10/25/2012 Welton Khwar Ontile

CR2E045 (03/12)