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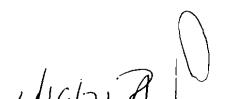
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CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Ami Casper ami.casper@cscglobal.com

Date: March 2, 2021

Order#: 610137-379

Re: CRUMP LIFE INSURANCE SERVICES, INC.

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: Ami Casper

c/o Corporation Service Company

251 Little Falls Drive 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.

OUCA.XCOA

$\dot{}$: STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	nge is sub	of sections 607.0502, 6 mitted for a corporation e its registered office or	n organized 1	nder the law	vs of the State o	of Pennsylv	
1. The name of t	he cornor:	ation: CRUMP LIFE IN	ISURANCE :	SERVICES.	INC.		
2. The principal	office add	ress: 389 Interpace Par	rkway, 4th F	loor, Parsipp	oany, NJ 0705	54	
3. The mailing a	ddress (if	different): c/o Katrina D.	Ramey, 200	West Second	Street, 3rd Floo	or, Winston-Sa	 alem, NC 271
4. Date of incorp	ooration/qu	ralification:12/13/2007	7	Document n	umber:F070	00006096	
		lress of the current regis state: (If resigned, enter t	~	nd registered	d office on file	with the	
	C T Corp	poration System					
	1200 So	uth Pine Island Road					
	Plantatio	าก		FL	33324	•	
6. The name and (if changed):	Corporat	lress of the new registeroion Service Company ys Street	ed agent (if c	hanged) and	l /or registered	office →	
P.O. Box NOT acceptable						173	
	Tallahas	see ———————————————————————————————————		FL_	32301	· ·	
		egistered office and the al.					-
Such change wa authorized by th	is authoriz	ed by resolution duly a properties the corporation has be	adopted by it been notified	s board of d in writing o	irectors or by a fithe change.	an officer so) -0 .
Xi	l P	agni	Jill	Cilmi, Vice I			-:- -:-
I herety accept I further agree to of my duties, and document is bein	o comply d l am fan ng filed m been noti	ntment as registered ag with the provisions of a niliar with and accept to erely to reflect a chang fied in writing of this co	all statutes re the obligatio se in the regi	oo to zert in t	d ortyped name an his capacity. proper and c tion as registe address, I her		formance Or, if this a that the
By: S		\ Lei	01/	18/2021			
Sign	nature of Reg	stered Agent			Date	+	
If signing on bel	half of an	entity:				•	
Ami M. Casper, Ty	Asst. Vice	 	-				

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