

January 30, 2001

Florida Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 200003633662--4 -02/05/01--01121--016 *****105.00 ******35.00

RE:

The Excess and Special Risk Market, Inc. Fireman's Fund Risk Management Services, Inc.

Structured Security Company, Inc. Agent for Service of Process

Dear Sir/Madam:

Enclosed please find a Statement of Change forms for the above noted companies, together with check 1760223 in the amount of \$105.00 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

enclosure

cc: B. Kushner

OI FEB-5 PM 2: 24
SECKETARY OF STATE COMMISSION Allianz Group

777 San Marin Drive Novato, CA 94998 Phone 415.899.2000

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

	he provisions of sections ed corporation organized				
	llowing statement in orde				
the State of Flo				a agoin, or bonn, ni	
1. The name of	f the corporation:	Structured Sec	urity Company, Inc	C	_
2. The mailing	address of the corporatio	· · · · · · · · · · · · · · · · · · ·			-
 		Novato CA 94	998 -		_
3. Date of ince	orporation/qualification: _	July 25, 1994	_ Document number: _	F94000003872	- 5
4. The name a	nd address of the current r	registered agent and of	fice:		
	Matthew E. Wolf				
	Fireman's Fund Ins	surance Companies,	5310 Cypress Cent	ter Drive	
5. The name ar	nd address of the new regi (P	istered agent (if change ?. O. Box Not Acceptal		fice (if changed):	
	Betsy L. Kushner	·			•
	no change	<u> </u>			
·			,	TALL	2 0
The street addagent, as change	ress of its registered offic ged, will be identical.	e and the street address	ss of the business offic	ce of its registered	
Such change v authorized by	was authorized by resoluti the board.	ion duly adopted by its	s board of directors or	by an officer so	S PA
(Signature	e of an officer, chairman or vice of	hairman of the board)		(24/0/ SE	2: 24 STATE
Janet	S. Kloenhamer, Corpo	orate Secretary	. •		
	(Printed or typed name an	d title)		-	-
Having been n corporation, I I further agree performance o registered age	named as registered agent hereby accept the appoint to comply with the proving form duties, and I am fan	t and to accept service atment as registered a isions of all statutes re niliar with and accept	of process for the about gent and agree to act is relative to the proper and the obligation of my p	ove stated in this capacity. nd complete oosition as	
	(Signature of Hegistered Agent)	2	\-ZZ-€	>1	
If signing on beha			(- 4.2)		
	y L. Kushner	-			
	(Typed or Printed Name)		(Capacity)	 	

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