F99000004260



ACCOUNT NO. : 07210000032

REFERENCE: 992181

AUTHORIZATION :

COST LIMIT :

\$ 35.00

ORDER DATE: February 6, 2001

ORDER TIME : 11:29 AM

ORDER NO. : 992181-020

CUSTOMER NO: 7197172

800003655968--2

CUSTOMER: Ms. Miriam Katz

National Financial Partners 1301 Avenue Of The Americas

30th Floor

New York, NY 10019

CHANGE OF AGENT

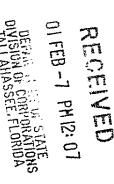
NAME: NFP SECURITIES, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

PLAIN STAMPED COPY

CONTACT PERSON: Janna Wilson



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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes,
the undersigned corporation organized under the laws of the State of _TEXAS
submits the following statement in order to change its registered office or registered agent, or both, in
the State of Florida.
1. The name of the corporation is: NFP SECURITIES, INC.
2. The mailing address of the corporation is: 1250 CAPITAL OF TEXAS HWY S., #2-600, AUSTIN, TX 7874
3. Date of incorporation/qualification: 8/16/1999 Document number: F99-4260
4. The name and address of the current registered agent and office:
LARRY B SCHWEIGER
CORNERSTONE ONE, SUITE 300, 1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324
5. The name and address of the new registered agent and office: (P. O. Box Not Acceptable)
Corporation Service Company
1201 Hays Street
Tallahassee, Florida 32301
The street address of its registered office and the street address of the business office of its registered agent, as changed, will be identical.
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board.
(Signature of an officer, chairman of vice chairman of the board) 2/5/07 (Date)
MIMAN I. Karz Ass't Secretary
(Printed or typed name and title) Having been named as registered agent and to accept service of process for the above stated corporation, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent.
By: Tabatha Figure 2 60 (Date)
if signing on behalf of an entity:
Tabatha Fiorelli Asst VP
(Typed or Printed Name) (Capacity)
* * * FILING FEE: \$35.00 * * *

CR2EO45(7/97)