

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6380

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Account Name : C T CORPORATION SYSTEM

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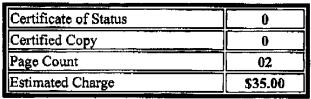
Fax Number

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

Email	Address:				
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REGISTERED AGENT CHANGE LIBERTY AMERICAN SELECT INSURANCE COMPANY





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

Pursuant to the provisions of sections 607.0502, 617.0502, 607. statement of change is submitted for a corporation organized un						
in order to change its registered office or registered ag						
1. The name of the corporation: Liberty American Select Insura	ince Company					
2. The principal office address: One Bala Plaza, Suite 100, Bala	Сулмус, РА 19004					
3. The mailing address (if different); Same						
4. Date of incorporation/qualification: 1/18/1989 D	Ocument number: K32971					
The name and street address of the current registered agent an Florida Department of State: (If resigned, enter resigned)	d registered office on file with the					
Meyer T. Bruce	Meyer T. Bruce					
7785 66th Street North						
Pinellas Park, FL 33781						
6. The name and street address of the new registered agent (if cha (if changed):	anged) and for registered office					
C T Corporation System	C T Corporation System					
c/o C T Corporation System, 1200 South Pine Isla	nd Road					
Р.О. Вих 1407 восерия						
Plantation, Plotida 33324						
The street address of its registered office and the street address as changed will be identical.	of the business office of its registered agent,					
Such change was authorized by resolution duly adopted by its authorized by the board, ar the corporation has been notified in	board of directors or by an officer so writing of the change.					
	HOMAS A. Rush & U.P. And Corp. County					
I hereby accept the appointment as registered agent and agree I further agree to comply with the provisions of all statutes religions of all statutes religions of the obligation document is being filed merely to reflect a change in the regist corporation has been notified in writing of this change.	to act in this capacity. ative to the proper and complete performance of my position as registered agent. Or, if this ered affice address, I hereby confirm that the					
By: C T Corporation System Signature of Registered Agent	April 28 , 2010					
If signing on behalf of an entity:						
Ann J. Williams, Assistant Vice President						
Typed or Printed Name						
* * * FILING FEE: \$35.	.00 * * *					

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

FL006 - 07/23/2009 C T System Online

CR2E045 (8/05)