M02000000490

(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	: #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies Certificates of Status		of Status
Special Instructions to,	Filipia Officari	
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Office Use Only



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SECRE JARY OF STATE AND ASSEEL FLORIDA

RECEIVED



ACCOUNT NO. : 07210000032

REFERENCE : 234845 124012C

AUTHORIZATION

COST LIMIT

\$ 25.00

ORDER DATE: March 2, 2005

ORDER TIME : 10:19 AM

ORDER NO. : 234845-620

CUSTOMER NO: 124012C

CUSTOMER: Ms. Caroline Barrante
The Hartford Life Inc. Law

200 Hopemeadow Street

Mail Stop Ble

Simsbury, CT 06089

CHANGE OF AGENT

NAME:

HARTFORD LIFE PRIVATE

PLACEMENT, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
PLAIN STAMPED COPY

CONTACT PERSON: Susie Knight

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company 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 limited liability company is: HARTFORD LIFE PRIVATE PLACEMENT, LLC
2. The mailing address of the limited liability company is :
100 Campus Drive, Suite 250, Florham Park, NJ 07932
Fig. #
02/20/2002 M02000000490
3. Date of filing/registration in Florida 4. Document number
5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:
C T Corporation System
Name
1200 South Pine Island Road
Address
Plantation, Fl 33324
City, State and Zip
6. The name and address of the new registered agent and/or office:
Corporation Service Company
Name
1201 Hays Street
Florida street address (P.O. Box NOT acceptable)
Tallahassee FL 32301
City, State and Zip
If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.
(Signature of a member or authorized representative of a member)
(Signature of a member of audiorized representative of a member)
Maureen Cullen, Attorney in Fact (Printed or typed name of signee)
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 auties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.
(Signature of Registered Agent)
Elizabeth A. Dawson, Asst. Vice Pres. Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FILING FEE: \$25.00

INHS18(10/99)