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ACCOUNT NO. : 072100000032 REFERENCE: 929727 7383347 AUTHORIZATION : COST LIMIT ORDER DATE: March 19, 2009 ORDER TIME : 10:03 AM ORDER NO. : 929727-005 CUSTOMER NO: 7383347 FOREIGN FILINGS NAME: CITIGROUP LIFE AGENCY LLC \_ CORPORATE LIMITED PARTNERSHIP LIMITED LIABILITY COMPANY XXXX AMENDMENT PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: \_\_\_ CERTIFIED COPY XX PLAIN STAMPED COPY \_\_\_\_\_ CERTIFICATE OF GOOD STANDING CONTACT PERSON: Joyce Markley -- EXT#

EXAMINER:

# APPLICATION BY FUREIGN LIMITED LIMITER AMENDMENT TO APPLICATION FOR AUTHORIZATION TO TRANSACT **BUSINESS IN FLORIDA**

## SECTION I (1-3 must be completed)

<ol> <li>Name of limited liability company as it appears on the records of the Florida Department.</li> <li>State: <u>Citigroup Life Agency LLC</u></li> </ol>	rtment of
2. Jurisdiction of its organization: <u>Delaware</u>	····
3. Date authorized to do business in Florida: 3/9/2009	
SECTION II (4-7 complete only the applicable changes)	
4. If the amendment changes the name of the limited liability company, when was the change effected under the laws of its jurisdiction of organization?	;
5. New name of the limited liability company: (must end with "Limited Liability Company, " "L.L.C.	," or "LLC.")
If name unavailable, enter alternate name adopted for the purpose of transacting busin Florida and attach a copy of the written consent of the managers or managing member the alternate name. The alternate name must end with "Limited Liability Company," "or "LLC.")	s adopting
6. If the amendment changes the period of duration, indicate new period of duration:	S 10 1
7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction	SEEL CORNER
3. If the amendment corrects any false statement, indicate the statement being correction: The limited liability company is member managed: Correction	eted and the
limited liability company is manager managed. The list of managers is at	ttached.
Attached is an original certificate, no more than 90 days old, evidencing the aforem amendment(s), duly authenticated by the official having custody of records in under the law of which this entity is organized.	
Signature of a member or the authorized representative of a member	
Timothy D. Williams, Manager	V
Typed or printed name of signee	

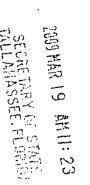
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## Managers of Citigroup Life Agency LLC

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