## P04406

· (Re	questor's Name)	· -
•	,	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bu	isiness Entity Nar	ne)
(Do	ocument Number)	
(-	,	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
	•	

Office Use Only



400297547084

04/07/17--01019--025 \*\*35.00



RAROCH8

APR 1 0 2017

I ALBRITTON



CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Rachel O'Hayer rachel.ohayer@cscglobal.com

Date: April 5, 2017

Order#: 566760-200

Re: SECURIAN FINANCIAL SERVICES, INC.

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$35.00.

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Rachel O'Hayer

c/o Corporation Service Company
2711 Centerville Road, Suite 400

Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

## STÄTEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	unge is submitted for a corporation orga	nized under the laws of the State of Minnesota tered agent, or both, in the State of Florida.	
1. The name of	the corporation: Securian Financial Serv	vices, Inc.	
2. The principal	office address: 400 North Robert Street	t, Saint Paul, MN 55101	
3. The mailing a	address (if different):		
4. Date of incor	poration/qualification: 12/19/1984	Document number: P04406	
	d street address of the current registered a rtment of State: (If resigned, enter resign	agent and registered office on file with the ed)	ක්ට 1
	C T Corporation System	ALIA TARA	
	1200 South Pine Island Road	SSEE	
	Plantation	FL 33324	
6. The name and (if changed):	I street address of the new registered age	FL 33324 Format (if changed) and /or registered office	
	Corporation Service Company		
	1201 Hays Street		
	P.O. Box NO	•	
	Tallahassee	FL 32301	
The street address changed will	ess of its registered office and the street be identical.	address of the business office of its registered agent	· ••
Such change wa authorized by th	as authorized by resolution duly adopted ne board, or the corporation has been no	d by its board of directors or by an officer so tified in writing of the change.	
X	el Came	Jill Cilmi, Vice President	
I hereby accept I further agree performance of agent. Or, if th hereby confirm	my duties, and I am tamiliar with and a	utes relative to the proper and complete accept the obligation of my position as registered lect a change in the registered office address, I	
By: \( \)	nace Cotyoble	03/27/2017	
_	half of an entity:	Date	
Grace E. Kirby,	Assistant Vice President		
T	yped or Printed Name		

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

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