## 04889

(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
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C.A. Change 6. OouHette FEB 1 3 2906



	ACCOUNT NO.	:	072100000	0032			
	REFERENCE	:	720859	4338527			
	AUTHORIZATION	0	mell of	nan			
	COST LIMIT	٤.	\$25.00	Mary			
ORDER DATE :	November 22, 200	5					
ORDER TIME :	9:55 AM						
ORDER NO. :	720859-015						
CUSTOMER NO:	4338527						
CHANGE OF AGENT							
NAME:	GENERAL SECUR INSURANCE COM						
	THE FOLLOWING AS TIED COPY STAMPED COPY	PR	OOF OF FII	ING:			
CONTACT PERSON		AMII	NER'S INIT	'IALS:			

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

	orovisions of sections 607.0302, 617.0302, nge is submitted for a corporation organiz				_
in orde	r to change its registered office or register	ed agent, or both, in the State of Flo	rida.		
1. The name of t	he corporation: GENERAL SECURITY NA	ATIONAL INSURANCE COMPANY	7		
2. The principal	office address: 199 Water Street, New York	k, NY 10038			
3. The mailing a	ddress (if different):		<del>_</del>		
4. Date of incorp	poration/qualification: 02/05/1985	Document number: P04889			
5. The name and	street address of the current registered age tment of State:		the		
	CT Corporation System		7.	N	
	1200 S. Pine Island Rd.		JECN.	2006 FEB 13	
	Plantation, Fl 33324		International ASS	8	
6. The name and (if changed):	1200 S. Pine Island Rd.  Plantation, Fl 33324  street address of the new registered agent	(if changed) and /or registered offic	EE, FLOR	PH 2:	FILED
	Corporation Service Company		IDA IDA	64	
	1201 Hays Street				
	(P.O. Box NOT acceptable)				
	Tallahassee, FL 32301				
The street addre	ess of its registered office and the street a be identical.	ddress of the business office of its	registere	d age	nt,
Such change wa	as authorized by resolution duly adopted the board, or the corporation has been not	by its board of directors or by an o ified in writing of the change.	fficer so		
Yhai	uelul	Maureen Cullen, Attorney in Fact			
/	re of an officer or director)	(Printed or typed name and titl	e)		_
I jurther agree t of my duties, an document is bei corporation has	the appointment as registered agent and to comply with the provisions of all status of I am familiar with and accept the obliging filed merely to reflect a change in the been notified in writing of this change.	agree to act in this capacity, tes relative to the proper and comp gation of my position as registered registered office address, I hereby	elete perj agent. ( confirm	Corman Or, if t that t	nce his he
Corporation By:	Service Company	02/09/2006			
/(Sig	nature of Registered Agent)	(Date)			_
If signing on be	half of an entity:				
Elizabeth A. Dav	vson, Asst. Vice President				
T)	yped or Printed Name)				

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