P06797

(Requestor's Name)
(Address)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
(Social Callings)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



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CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

*:4

From: Elizabeth Dawson edawson@cscinfo.com

Date: September 13, 2018

Order#: 372648-064

Re: TALCOTT RESOLUTION COMPREHENSIVE EMPLOYEE BENEFIT

Enclosed please find:

XX ___ Change of Registered Agent and Office.

XX Check in the amount of \$35. .

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: Elizabeth Dawson c/o Corporation Service Company 251 Little Falls Drive 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.

QUCA.XCOA

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

statement of cha	nge is submitted for a corpord	22, 617.0502, 607.1508, or 617.1508, Florida Statutes, this ation organized under the laws of the State of Connecticut se or registered agent, or both, in the State of Florida.		
i. The name of	the corporation: TALCOTT RES	SOLUTION COMPREHENSIVE EMPLOYEE BENEFIT SERVICE COMPANY		
	office address: One Hartford			
3. The mailing a	address (if different): One Had	tford Plaza, HO-1-11, Hartford, CT 06155		
4. Date of incor	poration/qualification: 07/19/	Document number: P06797		
5. The name and		registered agent and registered office on file with the		
	C T Corporation System			
	1200 South Pine Island Road			
	Plantation, FL 33324			
6. The name and (if changed):	d street address of the new reg	istered agent (if changed) and /or registered office		
	Corporation Service Compa	ny		
	1201 Hays Street			
		P.O. Box NOT acceptable		
	Tallahassee	FL 32301		
		the street address of the business office of its registered agent,		
Such change was authorized by resolution duly adopted by its board of directors or by am officer so authorized by the board, or the corporation has been notified in writing of the change.				
Xie (2. alnie	Jill Cilmi, Vice President		
I hereby accept I further agree performance of agent. Or, if th hereby confirm	to comply with the provisions I my duties, and I am familiar iis document is being filed me	Printed or typed name and side d agent and agree to act in this capacity. of all statutes relative to the proper and complete with and accept the obligation of my position as registered rely to reflect a change in the registered office address. I n notified in writing of this change.		
By: Aughe Co	nature of Registered Agent	09/10/2018 Date		
_	chalf of an entity:			
Elizabeth A. Da	awson, Asst. Vice President			
Typed or Printed Name				

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