

P16

Florida Department of State
Division of Corporations
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392

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2009 APR 29 AM 10:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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REGISTERED AGENT CHANGE

BERKLEY REGIONAL INSURANCE COMPANY

RECEIVED
2009 APR 29 AM 8:00
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TALLAHASSEE, FLORIDA

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Electronic Filing Menu

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Help

4-3009

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of _____ in order to change its registered office or registered agent, or both, in the State of Florida.

- 1. The name of the corporation: BERKLEY REGIONAL INSURANCE COMPANY
- 2. The principal office address: 475 STEAMBOAT RD., GREENWICH, CT 06830
- 3. The mailing address (if different): _____
- 4. Date of incorporation/qualification: 10/15/1987 Document number: P16392
- 5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

SUTHERLAND, BETTY C
8381 DIX ELLIS TRAIL, JACKSON BUILDING, SUITE 400
JACKSONVILLE, FL 32256

- 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

C T Corporation System
c/o C T Corporation System, 1200 South Pine Island Road
(P.O. Box NOT acceptable)
Plantation, Florida 33324

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The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

Robert F. Buehler
(Signature of an officer or director)

Robert F. Buehler - Treasurer
(Printed or typed name and title)

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 duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

By: *Bernadette McNamara*
(Signature of Registered Agent)

4/29/09
(Date)

If signing on behalf of an entity:

Bernadette McNamara
Assistant Secretary

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
 MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
 CR2E045 (8/05)