

Division of Corporations Public Access System

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Division of Corporations

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From:

Account Name : C T CORPORATION SYSTEM

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REGISTERED AGENT CHANGE

CHUBB SERVICES CORPORATION

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Corporate Filing Menu

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

statement of cha	nge is submitted for a	corporation organ	12, 607.1508, or 617.1508, Florida Statutes, sized under the laws of the State of Minols ered agent, or both, in the State of Florida.	this
1. The name of t	he corporation: Chubb	Services Corporati	on	
2, The principal	office address: 15 Mo	untain View Road,	Warren, NJ 07059	
3. The mailing a	ddress (if different):_			
4. Date of incom	oration/qualification:	5/28/1991	Document number: P34086	
	street address of the timent of State; (If resi		gent and registered office on file with the	
	THE PRENTICE-HA	LL CORPORATIO	n system inc.	
	1201 HAYS STREET	TALLAHASSEE,	FL 32301	O9 TALI
The name and (if changed):	street address of the	new registored ago	nt (if changed) and /or registered office	APR 10 CRETARY O LAHASSEE
	20070		200 South Pine Island Road	AN 9: 41 F STATE FLORID
		O. Box NOT acceptable		ADA 31.
		Plantation, Plo		D. 12
_			address of the business office of its regist d by its board of directors or by an officer stified in writing of the change.	
Kon	[[]]		Ken Nietzer, Vice President	
I hereby accept I further agree to of my duties, an document is bei carporation has	the appointment as r to comply with the pr d I am familiar with no filed merely to ref been notified in writ C T Corporacaplyste	egistered agent ar ovisions of all stat and accept the obj lect a change in th ing of this change	(Printed or typed mins and tale) and agree to act in this capacity. tutes relative to the proper and complete p ligation of my position as registered agent is registered office address, I hereby confi-	performance . Or, if this Irm that the
By: Cultury Kitause			March 30th, 2009	
(Sig	mature of Registered Agent)		(Date)	
If signing on be	half of an entity:	Anthony Li Vice Presi	Causi L	
		VICE TEST	aenr	
ņ	yped or Printed Name)	* * * FILING F	EE: \$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)