

P35042

Florida Department of State
Division of Corporations
Public Access System

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Division of Corporations
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Account Name : C T CORPORATION SYSTEM
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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DIVISION OF CORPORATIONS

REGISTERED AGENT CHANGE
LINCOLN GENERAL INSURANCE COMPANY

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C. Coulliette NOV 0 3 2006

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 Pennsylvania in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Lincoln General Insurance Company
2. The principal office address: PO Box 3709, York, PA 17402
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 08/06/1991 Document number: P35042
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

The Chief Financial Officer

PO Box 6200 (32314-6200)

Tallahassee, FL 32399

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

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.

[Signature]
(Signature of an officer or director)

James A. Stephens - V.P.
(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: Korri A. Behler
(Signature of Registered Agent)

10/30/06
(Date)

If signing on behalf of an entity:

KORRI A. BEHLER

Special 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

CR2E043 (8/05)

FL1004 - 09/14/2005 C T System Online

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