

P960000 1499 Z

ROBINS, KAPLAN, MILLER & CIRESI L.L.P.
ATTORNEYS AT LAW

ATLANTA
BOSTON
CHICAGO
LOS ANGELES
MINNEAPOLIS
ORANGE COUNTY
SAINT PAUL
SAN FRANCISCO
WASHINGTON, D. C.

2600 ONE ATLANTA PLAZA
950 EAST PACES FERRY ROAD, N. E.
ATLANTA, GEORGIA 30326-1119
TELEPHONE (404) 233-1114
FACSIMILE (404) 233-1267

500002990075--5
-09/17/99--01081--006
*****35.00 *****35.00

DAVID J. ROLLINS
Paralegal

September 14, 1999

VIA REGULAR MAIL

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Re: Le Mans Ré Management Company of Miami, Inc. f/k/a Mutuelle Du Mans
Management Company of Miami, Inc.
Our File No. 030834-0000

Dear Sir or Madam:

On behalf of Le Mans Ré Management Company of Miami, Inc., please find the following enclosed for filing:

1. One original and one conformed copy of the Statement of Change of Registered Office or Registered Agent or Both for Corporations for Le Mans Ré Management Company of Miami, Inc.; and

2. A check made payable to the Secretary of State in the amount of \$35.00 for the fees associated with filing the above.

Please return a stamp-filed copy to the undersigned in the enclosed self-addressed stamped envelope.

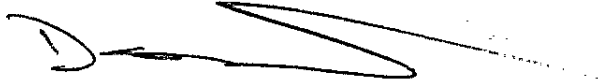
FILED
99 SEP 17 AM 10:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
RJH
9/22

Florida Department of State
September 14, 1999
Page 2

Should you have any questions, please feel free to contact me. Thank you for your assistance with this matter.

Sincerely,

ROBINS, KAPLAN, MILLER & CIRESI L.L.P.

A handwritten signature in black ink, appearing to read 'David J. Rollins', with a stylized, sweeping flourish extending to the right.

David J. Rollins
Paralegal for William J. Cohen, Esq.

DJR/

Enclosures

cc: Christophe Colle (w/Enclosures)
William J. Cohen, Esq. (w/out Enclosures)

**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, the undersigned corporation organized under the laws of the State of Florida submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation is: Le Mans Ré Management Company of Miami, Inc., formerly known as Mutuelles du Mans Management Company of Miami, Inc.
2. The mailing address of the corporation is: 2333 Ponce de Leon Boulevard, Suite 302, Coral Gables, Florida 33134.
3. Date of incorporation/qualification: February 16, 1996 Document number: P96000014992
4. The name and address of the current registered agent and office:

Clement Jordain
2333 Ponce de Leon Boulevard, Suite 1110
Coral Gables, Florida 33134

5. The name and address of the new registered agent and office: (P.O. Box Not Acceptable)

Christophe Colle
2333 Ponce de Leon Boulevard, Suite 1110
Coral Gables, Florida 33134

The street address of its registered office and the street address of the business office of its registered agent, if 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.

(Signature of an officer, chairman or vice chairman of the board)

9-7-99
(Date)

Christopher Colle, President
(Printed or typed name and title)

Having been named as registered agent and to accept service of process for the above stated corporation, 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.

(Signature of Registered Agent)

9-7-99
(Date)

If signing on behalf of an entity:

(Typed or Printed Name)

(Capacity)

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

CR2E045(7/97)

DIVISION OF CORPORATIONS P.O. BOX 6327 TALLAHASSEE, FL 32314