

State of Idaho

Office of the Secretary of State

CERTIFICATE OF WITHDRAWAL
OF
SECURITIES, ANNUITIES AND INSURANCE SERVICES, INC.
File Number C 93858

I, PETE T. CENARRUSA, secretary of State of the State of Idaho, hereby certify that Application for Certificate of Withdrawal from this State, duly executed pursuant to the provisions of the Idaho Business Corporation Act, has been received in this office and is found to conform to law.

ACCORDINGLY and by virtue of the authority vested in me by law, I issue this Certificate of Withdrawal and attach hereto a duplicate of the Application for such Certificate.

Dated: December 27, 1999



Pete T. Cenarrusa
SECRETARY OF STATE

By *Amanda Hill*



APPLICATION FOR CERTIFICATE OF FILED WITHDRAWAL

(Instructions on back of application)

DEC 27 2 48 PM '99

To the Secretary of State of Idaho

Pursuant to Section 30-1-1520, Idaho Code, the undersigned Corporation hereby applies for a certificate of withdrawal from the State of Idaho, and for that purpose submits the following statement:

1. The name of the corporation is Securities, Annuities and Insurance Services, Inc.

The name which it used in Idaho is same as above

2. It is incorporated under the laws of California

3. It is not transacting business in the State of Idaho.

4. It hereby surrenders its authority to transact business in said state.

5. It revokes the authority of its registered agent in the State of Idaho to accept service of process and consents that service of process in any action, suit or proceeding based upon any cause of action arising in the State of Idaho during the time it was authorized to transact business therein may thereafter be made on it by registered or certified mail to the corporation at the address listed in item 6., below.

6. The post office address to which process against the corporation may be mailed is GE Financial - Legal Dept. 6604 West Broad Street, Richmond, VA 23230

7. It agrees to notify the Secretary of State of the State of Idaho of any change to the address in Item 6.

By Shelley McMillan

Assistant Secretary

Its _____
(specify capacity of signer)

Customer Acct # :

(if using pre-paid account)

SECRETARY OF STATE

Secretary of State use only

12/27/1999 09:00

CK: 36338 CT: 74104 BH: 276560

1 @ 28.00 = 28.00 FOR WITHDR # 2

1 @ 28.00 = 28.00 EXPEDITE C # 3

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