

Business Insurance Group, Inc.

September 23, 1997

811679

VIA OVERNIGHT DELIVERY

FLORIDA DEPARTMENT OF STATE
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32399-0327

Re: **Christiania General Insurance Corporation of New York**

Dear Sir:

The above mentioned entity has changed its name to **COMMERCIAL COMPENSATION INSURANCE COMPANY** in its domiciliary state of New York effective August 12, 1997. To effectuate a name change in your state, I have enclosed the following:

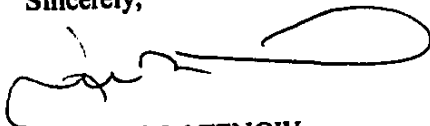
1. Application by Foreign Profit Corporation to File Amendment to Application for Authorization to Transact Business in Florida.
2. An original certificate from the state of incorporation.
3. Filing fees in the amount of \$96.25.
4. New list of officers and directors.

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-09/25/97--01078--008
*****96.25 *****96.25

Please change your records to reflect the address of the principle executive office is:
11092 Sun Center Drive
Rancho Cordova, CA 95670

Please process this name change and return to me at the address indicated below an amended Certificate of Authority. Should you have any questions, please feel free to contact me at (916) 859-5536.

Sincerely,



TRECIA M. NIENOW
Corporate Counsel

Enclosures

FILED
97 SEP 25 AM 11: 57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

11092 Sun Center Drive
Rancho Cordova, CA 95670
(800) 471-3179

See 9/30

N/C Amend

PROFIT CORPORATION

APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO APPLICATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA (Pursuant to s. 607.1504, F.S.)

SECTION I

(1-3 must be completed)

1. Christiania General Insurance Corporation of New York
Name of corporation as it appears on the records of the Department of State.
2. New York 10/25/40 3. 3/4/57
Incorporated under laws of Date authorized to do business in Florida

SECTION II

(4-7 complete only the applicable changes)

4. If the amendment changes the name of the corporation, when was the change effected under the laws of its jurisdiction of incorporation? 8/12/97
5. Commercial Compensation Insurance Company
Name of corporation after the amendment, adding suffix "corporation", "company" or "incorporated," or appropriate abbreviation, if not contained in new name of the corporation.

6. If the amendment changes the period of duration, indicate new period of duration.

New Duration

7. If the amendment changes the jurisdiction of incorporation, indicate new jurisdiction.

New Jurisdiction

Trecia M. Nienow
Signature
Trecia M. Nienow
Typed or printed name

9/19/97
Date
Secretary
Title

FILED
97 SEP 25 AM 11:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DIRECTORS AND OFFICERS LIST

COMMERCIAL COMPENSATION INSURANCE COMPANY

Directors

DIRECTOR

Name

DANA P. BROWN
MAURICE A. COSTA
DEBORAH DAY, M.D.
HELEN DELL
JEFFREY L. ELDER
DONALD A. EMEIGH
STEPHEN F. FALLON
JAY M. GELLERT
GREGORY L. JOHNSON
ROBERT A. KAMRATH
JACK R. POWELL
PAUL W. SOUZA
ROBERT P. WHITE

Officers

PRESIDENT

SENIOR VICE PRESIDENT - OPERATIONS

VICE PRESIDENT/TREASURER

SECRETARY

Name

MAURICE A. COSTA
ROBERT P. WHITE
PAUL W. SOUZA
TRECIA M. NIENOW

Certificate of Good Standing

STATE OF NEW YORK
INSURANCE DEPARTMENT

It is hereby certified that

COMMERCIAL COMPENSATION INSURANCE COMPANY
of New York, New York

was incorporated under the laws of the State of New York on October 25, 1940, under the title of CHRISTIANIA GENERAL INSURANCE CORPORATION OF NEW YORK and was licensed to transact insurance business in the State of New York on November 28, 1940; that it changed its name to COMMERCIAL COMPENSATION INSURANCE COMPANY on August 12, 1997.

IT IS HEREBY FURTHER CERTIFIED that the aforesaid Company is duly authorized in the State of New York to transact the business of accident and health, fire, miscellaneous property, water damage, burglary and theft, glass, boiler and machinery, elevator, animal, collision, personal injury liability, property damage liability, workers' compensation and employers' liability, fidelity and surety, credit, motor vehicle and aircraft physical damage, marine and inland marine, marine protection and indemnity, residual value, and credit unemployment insurance, as specified in paragraphs 3, 4, 5, 6, 7, 8, 9, 10, 11, 12, 13, 14, 15, 16, 17, 19, 20, 21, 22, and 24 of Section 1113(a) of the New York Insurance Law and also such workers' compensation insurance as may be incident to coverages contemplated under paragraphs 20 and 21 of Section 1113(a), including insurances described in the Longshoremen's and Harbor Workers' Compensation Act (Public Law No. 803, 69 Cong. as amended; 33 USC Section 901 et seq. as amended) and has been continuously licensed and remains in good standing to the date of this certificate.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the official seal of this Department at the City of Albany, New York, this 2nd day of September 1997.

NEIL D. LEVIN
Superintendent of Insurance

By

Frank M. D'Amico

Special Deputy Superintendent

