

April 3, 2000

Amendment Section
Division of Corporation
P. O. Box 6327
Tallahassee, Florida 32314

800003198748--2 -04/06/00--01084--013 *****43.75 ******43.75

RE:

Certificate of Fact/Name Change-From-Centris Life Insurance Company to HCC Life Insurance Company/NAIC No.: 92711

Dear Sir/Madam:

Please find enclosed the Application By Foreign Profit Corporation to file amendment to application for authorization to transact business in Florida, a Certificate of Status from the domiciliary Secretary of State and a check in the amount of \$43.75 for the filing fee.

If you should have any questions, you may contact me at (317) 238-5652 or at the referenced address or E-Mail delmam@iquest.com.

Sincerely,

Analyst

Enclosures

/dm

OD APR -5 AM IO: 19
SECRETARY OF STATE.

8573 PC 5000

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.	Name of Corporation as it appears on the records of the Department of State.	
2.	INDIANA Incorporated under laws of 3. 12/4/81 Date authorized to do business in Florida	
	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? 12/28/99	-
5.	HCC LIFE INSURANCE COMPANY	Santa Sa
	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.	U
	New Duration	
7.	If the amendment changes the jurisdiction of incorporation, indicate new jurisdiction.	
	New Jurisdiction	
	2/9/00 Date	
	Signature Date	
	JOSE A VELASLY SRIP, SECRETARY	
	Typed or printed name Srine Secretary Title	

STATE OF INDIANA OFFICE OF THE SECRETARY OF STATE CERTIFICATE OF FACT

To Whom These Presents Come, Greeting:

I, SUE ANNE GILROY, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the state of Indiana, the custodian of corporate records and the proper official to execute this certificate.

I further certify that records of this office disclose that

HCC LIFE INSURANCE COMPANY

filed Articles of Amendment changing the name from

CENTRIS LIFE INSURANCE COMPANY

to

HCC LIFE INSURANCE COMPANY



In Witness Whereof, I have hereunto set my hand and affixed the seal of the state of Indiana, at the City of Indianapolis, this Tuesday, March 28, 2000

Sue ann Lillag

SUE ANNE GILROY, Secretary of State

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