

A12 00000/004

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

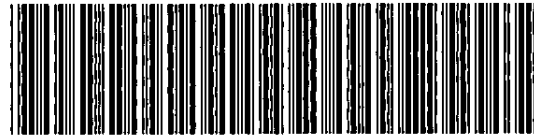
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900242681399

12/31/12--01002--017 **1052.50

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DEPARTMENT OF STATE
2012 DEC 28 AM 9:46
TALLAHASSEE, FLORIDA
12 DEC 28 PM 4:39

T. CLINE

DEC 31 2012

EXAMINER



CT Corporation
 515 East Park Avenue
 Tallahassee, FL 32301

850 222 1092 tel
 850 222 7615 fax
 www.ctcorporation.com

December 28, 2012

Department of State, Florida
 Clifton Building
 2611 Executive Center Circle
 Tallahassee FL 32301

Re: Order #: 8593211 SO
 Customer Reference 1: None Given
 Customer Reference 2: None Given

Dear Department of State, Florida:

Please obtain the following:

Axiom Re, Inc. (FL)
 Conversion
 Florida

Axiom Re, LP (FL)
 Formation
 Florida

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 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA
 Effective Date: 12/28/12

Enclosed please find a check for the requisite fees. Please return document(s) to the attention of the undersigned.

If for any reason the enclosed cannot be processed upon receipt, please contact the undersigned immediately at (850) 222-1092. Thank you very much for your help.

Sincerely,

Connie R Bryan
 Senior Fulfillment Specialist
 Connie.Bryan@wolterskluwer.com

Certificate of Conversion
For
"Other Business Organization"
Into

Florida Limited Partnership or Limited Liability Limited Partnership

This Certificate of Conversion and attached Certificate of Limited Partnership are submitted to convert the following "Other Business Entity" into a Florida Limited Partnership or Limited Liability Limited Partnership in accordance with s.620.2104, Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of this Certificate of Conversion is:

AXIOM RE, INC.

K 49744

(Enter Name of Other Business Entity)

2. The "Other Business Entity" is a Corporation
(Enter entity type. Example: corporation, limited liability company, sole proprietorship, general partnership, common law or business trust, etc.)

first organized, formed or incorporated under the laws of Florida
(Enter state, or if a non-U.S. entity, the name of the country)

on 12/07/1988

(Enter date "Other Business Entity" was first organized, formed or incorporated)

3. The name of the Florida Limited Partnership or Limited Liability Limited Partnership as set forth in the attached Certificate of Limited Partnership:

Axiom Re, LP

(Enter Name of Florida Limited Partnership or Limited Liability Limited Partnership)

4. The conversion was approved as required by Chapter 620, F.S., and was approved in such a manner that complied with the converting organization's governing law.

5. If not effective on the date of filing, enter the effective date: 12/31/2012 12:04 AM
(The effective date: 1) cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State; AND 2) must be the same as the effective date listed in the attached Certificate of Limited Partnership, if an effective date is listed therein.)

6. The conversion is permitted by the applicable law(s) governing the other business entity and the other business entity complies with such law(s) in effecting the conversion.

7. The "Other Business Entity" currently exists on the official records of the jurisdiction under which it is currently organized, formed or incorporated.

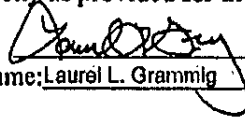
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TALLAHASSEE, FLORIDA

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Signed this 13 day of December, 20 12.

Signature of Each General Partner Listed in Attached Certificate of Limited Partnership/Limited Liability Limited Partnership: Individual(s) signing affirm(s) that the facts stated in this document are true. Any false information constitutes a third degree felony as provided for in s.817.155, F.S.

Signature: 
Printed Name: Laurel L. Grammig Title: VP of General Partner, Brown & Brown of Florida, Inc.

Signature: _____
Printed Name: _____ Title: _____

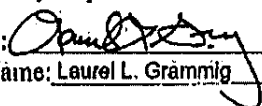
Signature: _____
Printed Name: _____ Title: _____

Signature: _____
Printed Name: _____ Title: _____

Signature: _____
Printed Name: _____ Title: _____

Signature: _____
Printed Name: _____ Title: _____

Required Signature(s) on behalf of Other Business Entity: Individual signing affirms that the facts stated in this document are true. Any false information constitutes a third degree felony as provided for in s.817.155, F.S. [See below for required signature(s).]

Signature: 
Printed Name: Laurel L. Grammig Title: Vice-President and Secretary

If Florida Corporation:
Signature of Chairman, Vice Chairman, Director, or Officer.
If Directors or Officers have not been selected, an Incorporator must sign.

If Florida General Partnership or Limited Liability Partnership:
Signature of one General Partner.

If Florida Limited Liability Company:
Signature of a Member or Authorized Representative.

All others:
Signature of an authorized person.

Fees:		
Certificate of Conversion:	\$	52.50
Fees for Florida Certificate of Limited Partnership: ((\$965 Filing Fee and \$35 Filing Fee)	\$	1,000.00
Certified Copy:	\$	52.50 (Optional)
Certificate of Status:	\$	8.75 (Optional)

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**CERTIFICATE OF LIMITED PARTNERSHIP
FOR
FLORIDA LIMITED PARTNERSHIP
OR
LIMITED LIABILITY LIMITED PARTNERSHIP**

1. Axlom Re, LP

*(Name of Limited Partnership or Limited Liability Limited Partnership, which must include suffix)
Acceptable Limited Partnership suffixes: Limited Partnership, Limited, L.P., LP, or Ltd.
Acceptable Limited Liability Limited Partnership suffixes: Limited Liability Limited Partnership, L.L.P.
or LLLP.*

2. 1200 S. Pine Island Road, Plantation, FL 33324

Street address of initial designated office.

3. CT Corporation System

Name of Registered Agent for Service of Process

4. 1200 S. Pine Island Road, Plantation, FL 33324

Florida street address for Registered Agent

5. *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 obligations of my position as registered agent.*



Signature of Registered Agent

**Kristin Bolden
Assistant Secretary**

6. 1200 S. Pine Island Road, Plantation, FL 33324

Mailing address of initial designated office

7. If limited partnership elects to be a limited liability limited partnership, check box .

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8. Name and business address of each general partner:

Name:

Business Address:

Brown & Brown of Florida, Inc.

220 S. RIDGEWOOD AVENUE

150416

DAYTONA BEACH, FL 32114 US

BB FL Holding, LLC

220 S. RIDGEWOOD AVENUE

LL2-149680


DAYTONA BEACH, FL 32114 US

9. Effective date, if other than the date of filing: 12/31/2012 12:04 AM

(Effective date cannot be prior to nor more than 90 days after the date the document is filed by the Florida Department of State.)

Signed this 13 day of December, 2012

Signature of each general partner: Individual(s) signing affirm(s) that the facts stated in this document are true. Any false information constitutes a third degree felony as provided for in s.817.155, F.S.



 Laurel I. Grammig, VP of General Partner,
 Brown & Brown of Florida, Inc.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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