F090000004326

(R	equestor's Name)					
(A	ddress)					
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(B	usiness Entity Name	e) .				
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SECRETARY OF STATE OF STATE OF CORPORATIONS

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1 Cm Ch 8

COVER LETTER

TO:	Amendment Section Division of Corporations			
SUBJI	ECT: Sovereign Insurance Group	o, Inc.		
	`	of Corporation)		
DOCU	MENT NUMBER: <u>F0900000432</u>	<u> </u>		
The en	closed Amendment and fee are submi	itted for filing.		
Please	return all correspondence concerning	this matter to the following:		
Traci	Houston			
	(Name of Contact Person)			
ILSA,	, Inc.			
	(Firm/Company)			
111 N	Railroad St			
	(Address)			
Groes	sbeck, TX 76642			
	(City/State and Zip Code)			
For fur	ther information concerning this matt	er, please call:		
Traci	Houston	at (254) 729-6157 (Area Code & Daytime Telephone Number)		
	(Name of Contact Person)	(Area Code & Daytime Telephone Number)		
Enclos	ed is a check for the following amour	nt:		
s	35.00 Filing Fee \$43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee & S52.50 Filing Fee, Certified Copy (Additional copy is enclosed) \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)		
Mailin	g Address: Iment Section	Street Address: Amendment Section		
	on of Corporations	Division of Corporations		
P.O. B	ox 6327	Clifton Building		
Tallahassee, FL 32314 2661 Executive Center Circle				
		Tallahassee, FL 32301		

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)

F090	000004326			DIVISE DIVISE
-	(Document number of co	orporation (if known)		11 HOV -2
Sovereign Insurance Group, Ir	nc.			2 630 C
(Name of cor	poration as it appears on th	e records of the Departm	ent of State)	# 9: 15
2.TX		3.11/02/2009		9. 19
(Incorporated under I	aws of)	(Date authori	zed to do business in	Florida)
				. '
(4-7	SECTION COMPLETE ONLY THE		ES)	
4. If the amendment changes the namits jurisdiction of incorporation?		when was the change	effected under the	laws of
CoVerica, Inc.				
(Name of corporation after the amappropriate abbreviation, if not co	endment, adding suffix ontained in new name	("corporation," "cor of the corporation)	npany," or "incorp	orated," or
(If new name is unavailable in Flor business in Florida)	ida, enter alternate cor	porate name adopted	for the purpose of	ftransacting
5. If the amendment changes the peri	od of duration, indicate	e new period of dura	cion.	
	(New dur	ation)		
7. If the amendment changes the juris	sdiction of incorporation	on, indicate new juris	diction.	
	(New juris	sdiction)		
1 paraexile	or other officer - if in the h	annds	α	,
of a receiver or other court appoi	nted fiduciary, by that fidu	ciary)		10/18/
(Typed or printed	name of person signing)		Title of person sig	$\frac{1}{\text{ning}}$

Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



Office of the Secretary of State

CERTIFICATE OF FILING OF

CoVerica, Inc. 68149400

[formerly: SOVEREIGN INSURANCE GROUP, INC.]

The undersigned, as Secretary of State of Texas, hereby certifies that a Certificate of Amendment for the above named entity has been received in this office and has been found to conform to the applicable provisions of law.

ACCORDINGLY, the undersigned, as Secretary of State, and by virtue of the authority vested in the secretary by law, hereby issues this certificate evidencing filing effective on the date shown below.

Dated: 10/10/2011

Phone: (512) 463-5555

Prepared by: Lori Castro

Effective: 10/10/2011



Hope Andrade Secretary of State

Fax: (512) 463-5709 TID: 10303 Dial: 7-1-1 for Relay Services Document: 392068860003 .. Corporations Section P.O.Box' 13697 ' Austin, Texas 78711-3697



Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that on October 11, 2011, SOVEREIGN INSURANCE GROUP, INC., a Domestic For-Profit Corporation (file number 68149400), changed its name to CoVerica, Inc..

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on October 25, 2011.



Hope Andrade Secretary of State

TID: 10267

Dial: 7-1-1 for Relay Services Document: 393993820005

Phone: (512) 463-5555 Prepared by: SOS-WEB