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| PICK-UP WAIT MAIL |
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| Special Instructions to Filing Officer: |
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| | COV | 'ER LETTER | |
|------------------------|--|---------------------------------------|--|
| | ent Section Division of Corporation as Insurance Company of Kansas | ~ / | # ** |
| | Name | of Corporation | |
| DOCUMENT NU | MBER: F13000004444 | | |
| The enclosed Amer | ndment and fee are submitted for | filing. | |
| Please return all co | prespondence concerning this ma | tter to the following: | |
| Felicia Daye | | | |
| | Name of Contact Person | | |
| AmTrust Insurance | e Company of Kansas, Inc. | | |
| | Firm/Company | | |
| 800 Superior Ave | E, 21st Floor | | |
| | Address | | |
| Cleveland, OH 44 | 114 | | |
| | City/State and Zip Code | | |
| regulatorycomplia | nce@amtrustgroup.com | | |
| E-mail addre | ss: (to be used for future annual r | eport notification) | |
| For further informa | ation concerning this matter, pleas | se call: | |
| Felicia Daye | | 216-901-855 at () | |
| Name of Contact Person | | Area Code & Daytime | Telephone Number |
| Enclosed is a check | k for the following amount: | | |
| ≥\$35 Filing Fee | ☐ \$43.75 Filing Fee & Certificate of Status | ☐ \$43.75 Filing Fee & Certified Copy | ☐ \$52.50 Filing Fee. Certificate of Status & Certified Copy |

Mailing Address:

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address:

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303



September 10, 2021

FELICIA DAYE 800 SUPERIOR AVE E 21ST FLOOR CLEVELAND, OH 44114

SUBJECT: AMTRUST INSURANCE COMPANY OF KANSAS, INC.

Ref. Number: F13000004444

We have received your document for AMTRUST INSURANCE COMPANY OF KANSAS, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

A certificate or a document of similar import evidencing the amendment must be submitted with the application. The certificate should be authenticated as of a date not more than 90 days prior to delivery of the application to the Department of State by the Secretary of State or other official having custody of the records in the jurisdiction under the laws of which it is incorporated, formed, or organized. A translation of the certificate, under oath or affirmation of the translator, must be attached to a certificate which is not in English.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 321A00021875

Irene Albritton
Regulatory Specialist III



February 13, 2021

FELICIA DAYE 800 SUPERIOR AVE E 21ST FLOOR CLEVELAND, OH 44114

SUBJECT: AMTRUST INSURANCE COMPANY OF KANSAS, INC.

Ref. Number: F13000004444

We have received your document for AMTRUST INSURANCE COMPANY OF KANSAS, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A certificate or a document of similar import evidencing the amendment must be submitted with the application. The certificate should be authenticated as of a date not more than 90 days prior to delivery of the application to the Department of State by the Secretary of State or other official having custody of the records in the jurisdiction under the laws of which it is incorporated, formed, or organized. A translation of the certificate, under oath or affirmation of the translator, must be attached to a certificate which is not in English.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton Regulatory Specialist II

Letter Number: 421A00003268

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)

| rij | 3000004444 | | | |
|---|--|------------------------|-----------------------|-------------|
| | (Document number of corporation (if known) | | | |
| AmTrust Insurance Company of Kansa | as, Inc. | | | |
| (Name of | f corporation as it appears on the records of the Department | of State) | | |
| Kansas | 3 10/11/2013 | , | | |
| (Incorporated undo | er laws of) (Date authorized to | to do business in Fl | orida) | |
| | SECTION II | | | |
| (4- | -7 COMPLETE ONLY THE APPLICABLE CHANGES | S) | | |
| If the amendment changes the name of incorporation? 03/31/2020 | the corporation, when was the change effected under the la | iws of its jurisdictio | n of | |
| AmTrust Insurance Company | | | | |
| (Name of corporation after the amendr not contained in new name of the corporation | ment, adding suffix "corporation," "company," or "incorpor poration) | ated," or appropriat | e abbre | eviation, |
| | | | in Flor | rida) |
| (If new name is unavailable in Florida. | enter alternate corporate name adopted for the purpose of ti | ransaciino nusiness | | |
| | enter alternate corporate name adopted for the purpose of ti | ransacting ousiness | | |
| | riod of duration, indicate new period of duration. | ransacting business | | |
| | | ransacting ousiness | , | |
| | | | | |
| 6. If the amendment changes the per | riod of duration, indicate new period of duration. (New duration) | ransacting business | | |
| 6. If the amendment changes the per | (New duration) isdiction of incorporation, indicate new jurisdiction. | ransacting business | | |
| 6. If the amendment changes the per | (New duration) isdiction of incorporation, indicate new jurisdiction. Delaware | ransacting business | 2022 JAH | |
| 6. If the amendment changes the per | (New duration) isdiction of incorporation, indicate new jurisdiction. | ransacting business | | |
| 6. If the amendment changes the per 7. If the amendment changes the juri | (New duration) isdiction of incorporation, indicate new jurisdiction. Delaware (New jurisdiction) | | 2022 JAH - 5 | |
| 6. If the amendment changes the per 7. If the amendment changes the juri | (New duration) isdiction of incorporation, indicate new jurisdiction. Delaware (New jurisdiction) d/or registered office address in Florida, enter the name | | 2022 JAH - 5 | |
| 6. If the amendment changes the per 7. If the amendment changes the juri | (New duration) isdiction of incorporation, indicate new jurisdiction. Delaware (New jurisdiction) d/or registered office address in Florida, enter the name | | 2022 JAH - | |
| 6. If the amendment changes the per 7. If the amendment changes the juri 8. If amending the registered agent and new registered agent and/or the new | (New duration) isdiction of incorporation, indicate new jurisdiction. Delaware (New jurisdiction) d/or registered office address in Florida, enter the name | | 2022 JAH - 5 PH 2: 4 | |
| 7. If the amendment changes the per 7. If the amendment changes the juri 7. If amending the registered agent and new registered agent and/or the new Name of New Registered Agent | (New duration) isdiction of incorporation, indicate new jurisdiction. Delaware (New jurisdiction) d/or registered office address in Florida, enter the name y registered office address: | of the | 2022 JAH - 5 PH 2: 48 | |
| 6. If the amendment changes the per 7. If the amendment changes the juri 8. If amending the registered agent and new registered agent and/or the new Name of New Registered Agent | (New duration) isdiction of incorporation, indicate new jurisdiction. Delaware (New jurisdiction) d/or registered office address in Florida, enter the name y registered office address: (Florida street address) | | 2022 JAH - 5 PH 2: 48 | |

Signature of New Registered Agent, if changing

| itle/ Capacity | <u>Name</u> | Address | Type of Action |
|---|---|---|---|
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| Attached is a certification to the application to the under the laws of which | ate or document of similar import he Department of State, by the Se ich it is incorporated. | rt, evidencing the amendment, authentic cretary of State or other official having of Signed by: | rated not more than 90 days prior to deliver ustody of corporate records in the jurisdiction |
| | Barr | y Moses | |
| _ | 6864 1 | SETADES48C irector, president or other officer - if in t | |

FILING FEE \$35.00

Page 1



I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY THAT THE SAID "AMTRUST INSURANCE
COMPANY OF KANSAS, INC." FILED A CERTIFICATE OF AMENDMENT,
CHANGING ITS NAME TO "AMTRUST INSURANCE COMPANY", ON THE THIRTYFIRST DAY OF MARCH, A.D. 2020, AT 8 O'CLOCK A.M.

AND I DO HEREBY FURTHER CERTIFY THE SAID "AMTRUST INSURANCE COMPANY OF KANSAS, INC." FILED A CERTIFICATE OF AMENDMENT, CHANGING ITS NAME TO "AMTRUST INSURANCE COMPANY", ON THE THIRTY-FIRST DAY OF MARCH, A.D. 2020, AT 8 O'CLOCK A.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "AMTRUST INSURANCE COMPANY", IS THE LAST KNOWN TITLE OF RECORD OF THE AFORESAID CORPORATION.



Authentication: 205121153

Date: 12-30-21



Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT

COPY OF THE CERTIFICATE OF CONVERSION OF A KANSAS CORPORATION

UNDER THE NAME OF 'AMTRUST INSURANCE COMPANY OF KANSAS, INC. TO A

DELAWARE CORPORATION, FILED IN THIS OFFICE ON THE THIRTY-FIRST DAY

OF MARCH, A.D. 2020, AT 7:56 O'CLOCK A.M.

A FILED COPY OF THIS CERTIFICATE HAS BEEN FORWARDED TO THE NEW CASTLE COUNTY RECORDER OF DEEDS.



Authentication: 202684220

Date: 03-31-20

7920080 8100F SR# 20202476487

State of Delaware
Secretary of State
Division of Corporations
Delivered 07:56 AM 03:31/2020
FILED 07:56 AM 03:31/2020
SR 20202476487 - File Number 7920880

STATE OF DELAWARE CERTIFICATE OF CONVERSION FROM A NON-DELAWARE CORPORATION TO A DELAWARE CORPORATION PURSUANT TO SECTION 265 OF THE DELAWARE GENERAL CORPORATION LAW

| 1.) | The jurisdiction where the Non-Delaware Corporation first formed is Kansas |
|----------|---|
| 2.) | The jurisdiction immediately prior to filing this Certificate is Kansas |
| 3.) | The date the Non-Delaware Corporation first formed is 01/10/1972 |
| 4.) | The name of the Non-Delaware Corporation immediately prior to filing this Certificate is AmTrust Insurance Company of Kansas, Inc. |
| 5.) | The name of the Corporation as set forth in the Certificate of Incorporation is AmTrust Insurance Company of Kansas, Inc. |
| IN of | WITNESS WHEREOF, the undersigned being duly authorized to sign on behalf the converting Non-Delaware Corporation have executed this Certificate on the day of February, A.D. 3030 |
| | By: Januar D |
| | Name: Janie V. Clark Print or Type |
| | Title: Assistant Secretary |
| | Print or Type |

<u>Delaware</u>

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE DO HEREBY CERTIFY THAT THE ATTACHED IS A TRUE AND
CORRECT COPY OF THE CERTIFICATE OF INCORPORATION OF 'AMTRUST
INSURANCE COMPANY OF KANSAS, INC.' FILED IN THIS OFFICE ON THE

A FILED COPY OF THIS CERTIFICATE HAS BEEN FORWARDED TO THE NEW CASTLE COUNTY RECORDER OF DEEDS.

THIRTY-FIRST DAY OF MARCH, A.D. 2020, AT 7:56 O'CLOCK A.M.



Authentication: 202684220

Date: 03-31-20

STATE of DELAWARE CERTIFICATE of INCORPORATION A STOCK CORPORATION

| • First: The name of this Corporation is |
|---|
| AmTrust Insurance Company of Kansas, Inc. |
| • Second: Its registered office in the State of Delaware is to be located at 251 LIttle Falls Drive Street, in the City of Wilmington County of New Castle Zip Code 19808 The registered agent in charge thereof is Corporation Service Company |
| Third: The purpose of the corporation is to engage in any lawful act or activity for which corporations may be organized under the General Corporation Law of Delaware. |
| • Fourth: The amount of the total stock of this corporation is authorized to issue is |
| 347,828 shares (number of authorized shares) with a par value of |
| 11.50 per share. |
| • Fifth: The name and mailing address of the incorporator are as follows: Name Janie V. Clark, c/o AmTrust North America Mailing Address 800 Superior Ave. E., 21st Floor Cleveland, OH Zip Code 44114 |
| • I, The Undersigned, for the purpose of forming a corporation under the laws of the State of Delaware, do make. file and record this Certificate, and do certify that the facts herein stated are true, and I have accordingly hereunto set my hand this |
| (type or print) |

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT
COPY OF THE CERTIFICATE OF AMENDMENT OF 'AMTRUST INSURANCE
COMPANY OF KANSAS, INC.', CHANGING ITS NAME FROM "AMTRUST
INSURANCE COMPANY OF KANSAS, INC." TO "AMTRUST INSURANCE
COMPANY", FILED IN THIS OFFICE ON THE THIRTY-FIRST DAY OF
MARCH, A.D. 2020, AT 8 O'CLOCK A.M.

A FILED COPY OF THIS CERTIFICATE HAS BEEN FORWARDED TO THE NEW CASTLE COUNTY RECORDER OF DEEDS.

Authentication: 202684305 Date: 03-31-20

7920080 8100 SR# 20202476528

You may verify this certificate online at corp.delaware.gov/authver.shtml

State of Delaware
Secretary of State
Division of Corporations
Delivered 07:56 AM 03:31:2020
FILED 08:00 AM 03:51:2020
SR 20202476528 - Fib Number 7920080

STATE OF DELAWARE SE 2020 CERTIFICATE OF AMENDMENT OF CERTIFICATE OF INCORPORATION

| The corporation organized and existing under and by virtue of the General |
|--|
| Corporation Law of the State of Delaware does hereby certify: |
| FIRST: That at a meeting of the Board of Directors of |
| AmTrust Insurance Company of Kansas, Inc. |
| resolutions were duly adopted setting forth a proposed amendment of the Certificate of Incorporation of said corporation, declaring said amendment to be advisable and calling a meeting of the stockholders of said corporation for consideration thereof. The resolution setting forth the proposed amendment is as follows: |
| RESOLVED, that the Certificate of Incorporation of this corporation be amended |
| by changing the Article thereof numbered "First "so that, as |
| amended, said Article shall be and read as follows: |
| The name of this Corporation is: |
| AmTrust Insurance Company |
| SECOND: That thereafter, pursuant to resolution of its Board of Directors, a special meeting of the stockholders of said corporation was duly called and held upon notice in accordance with Section 222 of the General Corporation Law of the State of Delaware at which meeting the necessary number of shares as required by statute were voted in favor of the amendment. TRIRD: That said amendment was duly adopted in accordance with the provisions of Section 242 of the General Corporation Law of the State of Delaware. |
| IN WITNESS WHEREOF, said corporation has caused this certificate to be |
| signed this 13th day of February, 2020. |
| By: Authorized Officer Title: Assistant Secretary |
| Name: Jania W. Glant |
| Name: Janie V. Clark Print or Type |
| → 1 |