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(((H22000368610 3)))



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To:

Division of Corporations

Fax Number : (850)617-6380

From:

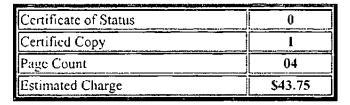
Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 : (954)208-0845 Fax Number : (614)573-3996

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:_

COR AMND/RESTATE/CORRECT OR O/D RESIGN SOUTHWEST INSURANCE AGENCY, INC.



Electronic Filing Menu

Corporate Filing Menu

To:

PROFIT CORPORATION APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO APPLICATION FOR AUTIIORIZATION TO TRANSACT BUSINESS IN FLORIDA

(Pursuant to s. 607.1504, F.S.)

SECTION I (1-3 MUST BE COMPLETED)

F95000	0005595				
	(Document number of corporation (if known)				
SOUTHWEST INSURANCE AGENCY, I	INC.				
(Name of cor	poration as it appears on the records of the Departme	ent of State))		
2 Texas	3 11/15/1995				
(Incorporated under la	ws of) (Date authorize	d to do bus	iness in Florid	a)	
(4-7 C	SECTION II COMPLETE ONLY THE APPLICABLE CHANG	GES)			
4. If the amendment changes the name of the incorporation! 04/24/1978	corporation, when was the change effected under the	laws of its	jurisdiction of	•	
Hilltop Securities Insurance Agency Inc.					
(Name of corporation after the amendment not contained in new name of the corporat	t, adding suffix "corporation," "company," or "incorpion)	oorated," or	appropriate at	breviati	on, it
(If new name is unavailable in Florida, ente	er alternate corporate name adopted for the purpose of	f transactin	g business in I		
6. If the amendment changes the period	of duration, indicate new period of duration.			OCT	, 10 g
•				.2	p#
			•		-
	(New duration)		,) - 	==	3 - 3
7. If the amendment changes the jurisdic	ction of incorporation, indicate new jurisdiction.		- :	AH 8: 49	
-	(New jurisdiction)				
	registered office address in Florida, enter the nar	ne of the			
new registered agent and/or the new reg	istered office address:				
Name of New Registered Agent					
	(Florida street address)				
New Registered Office Address:	(City)	, Florida	(Zin Coda)	_	
		•	улу Сойе)		
New Registered Agent's Signature, if ch	hanging Registered Agent: cred agent. I am familiar with and accept the obligat	tions of the	nasitian		
, heren, weech me approximent to registe	. e. agen. Tam pamina a un una ucceja inc innigui	19 106	1 semme		
Signature of New Regist	ered Agent, if changing				

9. If the amendment changes person, title or capacity in accordance with 607.1504 (4), indicate that change:

Title/ Capacity	<u>Name</u>	Address	Type of Action		
			Add		
			[Remove		
			Add		
			L.Remove		
			Add		
			^dd 2		
			Likemove AH 89		
			ک : ک Add		
10. Attached is a	certificate or document of similar import, evicent to the Department of State, by the Secreta	idencing the amendment, authenticated no	1 Remove of more than 90 days prior to delivery		
of the applicat under the laws	s of which it is incorporated.		or corporate records in the jurisdiction		
	•	ongo I Min			
	(Signature of a directo a receiver or other co	or, president or other officer - if in the han- urt appointed fiduciary, by that (iduciary)			
IENNIEED I	MINCER	ASSISTANT SECRETARY			

FILING FEE \$35.00

(Typed or printed name of person signing)

(Title of person signing)

To: Page: 5 of 5 2022-10-27 12:14:36 CST 12122023573 From: David Thomas

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



John B. Scott Secretary of State

Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that on September 15, 2022, SOUTHWEST INSURANCE AGENCY, INC., a Domestic For-Profit Corporation (file number 43352900), changed its name to Hilltop Securities Insurance Agency Inc.

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 26, 2022.



Phone: (512) 463-5555

Prepared by: SOS-WEB

John B. Scott Secretary of State