F97 COCCC 5874

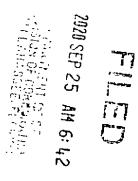
(Req	uestor's Name)	1
(Add	ress)	
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(City)	/State/Zip/Phon	e #)
PICK-UP	MAIT	MAIL
		
(Busi	iness Entity Nai	me)
(Doc	ument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to Fi	iling Officer:	
		1





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09/25/20--01012--012 **85.00



NOV 02 2020 S. YOUNG

COVER LETTER

TO: Amendm	ent Section Division of Corporati	ons	
SUBJECT: The F	armington Company DBA TFC II		
		e of Corporation	
DOCUMENT NU	MBER: F97000005874		
The enclosed Ame	endment and fee are submitted for	filing.	
Please return all co	orrespondence concerning this ma	tter to the following:	
DOUGLAS MAN	TZ		
-	Name of Contact Person		
THE BCMT HOL	DING COMPANY		
	Firm/Company		
30 WATERSIDE	DRIVE		
	Address		
FARMINGTON,	CT 06032		
	City/State and Zip Code		
CORPMANAGER	@FARMINGTONCO.COM		
E-mail addre	ss: (to be used for future annual r	eport notification)	
For further informa	ation concerning this matter, plea	se call:	
KORRIE SPRONG	Ĵ	at (678-6782	
Name of Contact Person		Area Code & Daytime	Telephone Number
Enclosed is a check	k for the following amount:		
1\$35 Filling 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

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)

F97000005874

	(Document nu	ımber of corporatio	n (if known)		
1. TFC INSURANCE AGENCY IN	IC				
	me of corporation as it app		•		
2. CONNECTICUT	CONNECTICUT (Incorporated under laws of) (Date authorized to do business in Florida)				
(Incorporated	l under laws of)		(Date authorized to do	business in Flor	ida)
	(4-7 COMPLETE ON	SECTION II SLY THE APPLIC	CABLE CHANGES)		
4. If the amendment changes the nar incorporation? APRIL 20, 2020	me of the corporation, whe	en was the change ϵ	effected under the laws o	of its jurisdiction (of
THE BCMT HOLDING COMPA	NY				
(Name of corporation after the an not contained in new name of the	nendment, adding suffix "	corporation." "com	pany," or "incorporated	," or appropriate	abbreviation, if
(If new name is unavailable in Flo	orida, enter alternate corpo	rate name adopted	for the purpose of trans:	acting business in	Florida)
6. If the amendment changes th	ne period of duration, indic	cate new period of (duration.		
		(New duration)			
7. If the amendment changes th	ne jurisdiction of incorpora	ntion, indicate new	jurisdiction.		
		(New jurisdiction)			~>
8. If amending the registered ager new registered agent and/or the			da, enter the name of t	he 33 1	7020 SFP 20
Name of New Registered Age	ent	-			e de la companya de l
		ida street address)		<u> </u>	O
New Registered Office Address	<u>y</u> :	(City)	, Florid	a(Zip Code)	<u></u>
				(Zip Couc)	
New Registered Agent's Signat I hereby accept the appointment of Signature of N	ture, if changing Register as registered agent. I am ew Registered Agent, if ch	familiar with and a	accept the obligations of	the position.	

Fitle/ Capacity	<u>Name</u>	<u>Address</u>	Type of Action
			Add
			Remove
			Add
			Add
			bAdd
			Remove
Attached is a certific of the application to under the laws of w	cate or document of similar import, the Department of State. by the Secre- hich it is incorporated.	eyillencing the amendment, authenti- etary of State or other official having o	cated not more than 90 days prior to delive custody of corporate records in the jurisdicti
•	(Signature of a dire	ector, president or other officer - if/in court appointed fiduciary by that/fid	the hands of

FILING FEE \$35.00

.

Secretary of The State of Connecticut

I, the Secretary of The State of Connecticut, and keeper of the seal thereof, DO HEREBY CERTIFY, that the certificate of incorporation of

THE BCMT HOLDING COMPANY

a domestic STOCK corporation, was filed in this office on July 31, 1980, a certificate of dissolution has not been filed, the corporation has filed all annual reports, and so far as indicated by the records of this office such corporation is in existence.

Secretary of The State of Connecticut

Date Issued: September 12, 2020

Lemi Whenk

Business ID: 0108051 Express Certificate Number: 2020352381001

Note: To verify this certificate, visit the web site http://www.concord.sots.ct.gov



SECRETARY OF THE STATE OF CONNECTICUT

MAILING ADDRESS: COMMERCIAL RECORDING DIVISION, CONNECTICUT SECRETARY OF THE STATE, P.C. BOX 150470, HARTFORD, CT 68:15-6470
DELIVERY ADDRESS: COMMERCIAL RECORDING DIVISION, CONNECTICUT SECRETARY OF THE STATE, 30 TRINITY STREET, HARTFORD, C1 06:08
PHONE: 860-509-6003 WEBSITE: www.concord-sols.ct.goy

CERTIFICATE OF AMENDMENT

STOCK CORPORATION

TOOK OOK OKATION	ETI TNO HOOGGODALIII
	FILING #0006894120 PG 01 OF 02 VOL B-02639 FILED 04/20/2020 09:00 AM PAGE 01545
SE INK. COMPLETE ALL SECTIONS PRINT OR TYPE, ATTAÌ 	SECRETARY OF THE STATE

JOE HAN. COMPLET	E MEE SECTIONS PRINT OF	RITPE, ATTAI	CONNECTO	SECRET	ARY OF THE STATE
FILING PARTY	(CONFIRMATION WILL BE	SENT TO THI	COMMENT	COI SEC	RETARY OF THE STATE
NAME.	Cohn Birnbaum & Shea	P.C.		1	MAKE CHECKS PAYABLE TO "SECRETARY OF THE STATE"
ADDRESS:	100 Pearl Street, 12th F	Floor			
	Attn: Lisa F Neary Para	alegal			
CITY:	Hartford			<u> </u>	
STATE;	СТ	ZIP: 0610	13		
1. NAME OF C	ORPORATION:				
The Farm	ington Company				
2. THE CERTIF	FICATE OF INCORPOR	ATION IS (CHE	CK A, B OR C):		
A. AMEND	ED				
☐ B. RESTA	red				
C. AMEND	ED AND RESTATED				
THE RESTATED	CERTIFICATE CONSOLIDAT	ES ALL AMENDMEN	ITS INTO A SINGLE	E DOCUME!	VT,
3. CHECK 3A	OR 3B OR BOTH, AS A	PPROPRIATE.			
🗵 3A. TEXT	OF EACH AMENDME	NT / RESTATEM	ENT:		
Section 1 sha	ill read:				
"1. The name	e of the corporation is	The BCMT Hold	ing Company."		
		•			
			 -		

FORM CAS-1-1.0 REV. 10/2014

3B. ELECTION OF BENEFIT CORPORATION STATUS. (MUST check box 38 if electing Benefit Corporation Status.)			
The corporation elects to be a Benefit Corporation. In addition to the stated purposes for which the corporation is formed, the corporation shall also have the purpose to create a general public benefit as defined in the Connecticut Benefit Corporation Act. [NOTE: If the Benefit Corporation adopts one or more specific public benefits in addition to the required general public benefit, then the corporation must set forth the specific public benefit(s) in Box 3A, "TEXT OF EACH AMENDMENT/RESTATEMENT", above. If so, then BOTH Box 3A AND Box 3B should be checked on the form.]			
			
4. VOTE INFORMATION (SELECT A	, B, C OR D):		
A. THE AMENDMENT WAS APPROVED BY SHAREHOLDERS IN THE MANNER REQUIRED BY SECTIONS 33-600 TO 33-998 OF THE CONNECTICUT GENERAL STATUTES, AND BY THE CERTIFICATE OF INCORPORATION.			
B. THE AMENDMENT WAS APPROVED BY THE INCORPORATORS. NO SHAREHOLDER APPROVAL WAS REQUIRED.			
C. THE AMENDMENT WAS APPROVED BY THE BOARD OF DIRECTORS. NO SHAREHOLDER APPROVAL WAS REQUIRED.			
D. THE AMENDMENT WAS APPROVED BY A MINIMUM STATUS VOTE, AS REQUIRED BY THE CONNECTICUT BENEFIT CORPORATION ACT. SELECT D IF A MINIMUM STATUS VOTE RESULTED IN THE ELECTION OF BENEFIT CORPORATION STATUS.			
5. EXECUTION:			
DATED THIS 16th	DAY OF April	, 20 20	
NAME OF SIGNATORY (print or type)	CAPACITY/TITLE OF SIGNATORY	SIGNATURE	
Douglas Mantz	Secretary	Wert	
		<u></u>	

STATE OF CONNECTICUT OFFICE OF THE SECRETARY OF THE STATE

I hereby certify that this is a true copy of record

In this Office.
In Testimony whereof, I have nereunto set my name and affixed the Seal of said State, at Hartford, this 20th day of April A.D. 2020