

Division of Corporations Page 1 of 1  
**F98000000529**

Florida Department of State  
Division of Corporations  
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**\*RE-SUBMIT\***

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**COR AMND/RESTATE/CORRECT OR O/D RESUB**

**COUNTRYWIDE INSURANCE SERVICES, INC.**

Certificate of Status	0
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TALLAHASSEE, FLORIDA  
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4/28/09  
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April 27, 2009

FLORIDA DEPARTMENT OF STATE

Division of Corporations  
COUNTRYWIDE INSURANCE SERVICES, INC.  
8521 FALLBROOK AVE  
WE-11  
WEST HILLS, CA 91304

SUBJECT: COUNTRYWIDE INSURANCE SERVICES, INC.  
REF: F98000000529

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Please correct the date on line 4 to read 4-20-09.

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Annette Ramsey  
Regulatory Specialist II

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TALLAHASSEE, FLORIDA

P.O BOX 6327 - Tallahassee, Florida 32314

**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)**

\_\_\_\_\_  
(Document number of corporation (if known))

1. Countrywide Insurance Services, Inc.  
(Name of corporation as it appears on the records of the Department of State)
2. California 3. 01/29/1998  
(Incorporated under laws of) (Date authorized to do business in Florida)

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**SECTION II**  
**(4-7 COMPLETE ONLY THE APPLICABLE CHANGES)**

4. If the amendment changes the name of the corporation, when was the change effected under the laws of its jurisdiction of incorporation? 4/20/09
5. Balboa Insurance Services, Inc.  
(Name of corporation after the amendment, adding suffix "corporation," "company," or "incorporated," or appropriate abbreviation, if not contained in new name of the corporation)
- (If new name is unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
6. If the amendment changes the period of duration, indicate new period of duration.  
\_\_\_\_\_  
(New duration)
7. If the amendment changes the jurisdiction of incorporation, indicate new jurisdiction.  
\_\_\_\_\_  
(New jurisdiction)
8. Attached is a certificate or document of similar import, evidencing the amendment, authenticated 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 corporate records in the jurisdiction under the laws of which it is incorporated.

C. Costamagna  
(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)

Christine Costamagna  
(Typed or printed name of person signing)

Secretary  
(Title of person signing)

**State of California  
Secretary of State**

**CERTIFICATE OF FILING**

I, **DEBRA BOWEN**, Secretary of State of the State of California, hereby certify

That on the **20th day of April, 2009**, there was filed in this office an amendment changing the corporation name from **COUNTRYWIDE INSURANCE SERVICES, INC.**, a California corporation, to **BALBOA INSURANCE SERVICES, INC.**

IN WITNESS WHEREOF, I execute  
this certificate and affix the Great Seal  
of the State of California this day of  
April 23, 2009.



*Debra Bowen*

**DEBRA BOWEN**  
Secretary of State