F98000003495

| (Requestor's Name) | |
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| (Address) | |
| | |
| (Address) | |
| | |
| (City/State/Zip/Phone #) | |
| PICK-UP WAIT MAIL | |
| | |
| (Business Entity Name) | |
| | |
| (Document Number) | |
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| Certified Copies Certificates of Status | |
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| Special Instructions to Filing Officer: | |
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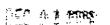
Office Use Only



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11/28/06--01068--004 **52.50







COVER LETTER

| TO: Amendment Section Division of Corporations | | |
|---|---|--|
| SUBJECT: Bristol West Insurance Company (Name of Corporation) | | |
| DOCUMENT NUMBER: F9800000349 | 5 | |
| The enclosed Amendment and fee are subm | itted for filing. | |
| Please return all correspondence concerning | this matter to the following: | |
| Eric S. Gordon, Esq. (Name of Contact Person) | <u> </u> | |
| Bristol West Insurance Company (Firm/Company) | | |
| Rockside Center III, 5990 West (Address) | Creek Road | |
| Independence, Ohio 44131 (City/State and Zip Code) | | |
| For further information concerning this matter, please call: | | |
| Eric S. Gordon, Esq. (Name of Contact Person) | at (216) 674-7095 (Area Code & Daytime Telephone Number) | |
| Enclosed is a check for the following amount: | | |
| \$35.00 Filing Fee \$43.75 Filing Fee & Certificate of Status | \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed) | |
| Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 | Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 | |



Apex Adjustment Bureau, Inc. Bayview Adjustment Bureau, Inc. Bristol West Casualty Insurance Company Bristol West Insurance Company Bristol West Insurance Services of California, Inc. Bristol West Insurance Services, Inc. of Florida Bristol West Insurance Services of Nevada, Inc. Bristol West Insurance Services of Texas, Inc. Bristol West Preferred Insurance Company

Coast National Insurance Company Insurance Data Systems, G.P. Coast National General Agency, Inc. Security National Insurance Company

Eric S. Gordon, Esq. Direct Line 216.674.7095 Fax 216.446.4599 Eric.Gordon@Bristolwest.com

November 27, 2006

SENT VIA FEDERAL EXPRESS

Ms. Susan Payne, Senior Section Administrator Florida Department of State Division of Corporations, Amendment Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

RE: Bristol West Insurance Company (F98000003495)

Application for change of jurisdiction (For-Profit, Foreign Company)

Dear Ms. Payne:

Bristol West Insurance Company, a foreign for-profit corporation licensed in Florida, has redomesticated from Pennsylvania to Ohio. The Redomestication was effective on September 27, 2006. To allow the Division of Corporations to record this change, I have included the following documents:

- The Application to File Amendment to Application For Authorization to Transact Business in Florida:
- The Amended and Restated Articles of Incorporation for Bristol West Insurance Company;
- A filing fee of \$52.50; and
- The cover letter containing my contact information.

This information was previously submitted, however, it appears that the documents above were never forwarded to your department. As such, I have remitted the letter you sent with out check.

Should you have any questions or comments, I can be reached directly at (216) 674-7095 or via electronic mail at Eric.Gordon@Bristolwest.com.

Sincerely,

Eric S. Gordon

Associate General Counsel

Bristol West Insurance Company



FLORIDA DEPARTMENT OF STATE Division of Corporations

November 17, 2006

Eric Ceordon Bristol WEst Insurance Company 5990 West Creek Rd. Independence, OH 44131

SUBJECT: BRISTOL WEST INSURANCE COMPANY

Ref. Number: F98000003495

Upon receipt of your letter and/or check(s) totaling \$52.50, no document was found. Please send your document with any fees due to:

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

Please return a copy of this letter to ensure your money is properly credited.

If you have any questions concerning this matter, please either respond in writing or call (850) 245-6901.

Letter Number: 706A00067426

Susan Payne Senior Section Administrator

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)

| F98000003495 | |
|--|---|
| (Document number | er of corporation (if known) |
| Bristol West Insurance Company | |
| 4, | s on the records of the Department of State) |
| 2. Pennsylvania | . August 23, 1999 |
| 2. (Incorporated under laws of) | 3. August 23, 1999 (Date authorized to do business in Florida) |
| | |
| | CTION II THE APPLICABLE CHANGES) |
| 4. If the amendment changes the name of the corporat | ion, when was the change effected under the laws of |
| its jurisdiction of incorporation? | |
| 5. (Name of corporation after the amendment, adding appropriate abbreviation, if not contained in new r | suffix "corporation," "company," or "incorporated," or name of the corporation) |
| (If new name is unavailable in Florida, enter alterna business in Florida) | te corporate name adopted for the purpose of transacting |
| 6. If the amendment changes the period of duration, in | dicate new period of duration. |
| | ~ |
| (N) | ew duration) |
| 7. If the amendment changes the jurisdiction of incorp Ohio | ASS ASS |
| (Ne | w jurisdiction) |
| f And | FLORIU FLORIU |
| (Signature of a director, president or other officer - if of a receiver or other court appointed fiduciary, by the | in the hands at fiduciary) |
| Eric S. Gordon, Esq. | |
| (Typed or printed name of person sign | ing) (Title of person signing) |

State of Phio Pepartment of Insurance <u>CERTIFICATION</u>

As Director of Insurance of the State of Ohio, I do hereby certify that the annexed copy of the:

Amended and Restated Articles of Incorporation, as amended, of BRISTOL WEST INSURANCE COMPANY dated June 5, 2006

is a true copy of the original on file with this department.

October 23, 2006

IN WITNESS WHEREOF, I have hereunto subscribed my name and caused my seal to be affixed at Columbus, Ohio, this day and date.



Ann H. Womer Benjamin, Director of Insurance

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