Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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(((H13000097692 3)))



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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : AKERMAN SENTERFITT (MIAMI)

Account Number : 075471001363

Phone : (305)374-5600

Fax Number : (305)374-5095

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

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## COR AMND/RESTATE/CORRECT OR O/D RESIGN MAPFRE ASSISTANCE USA INC.

Certificate of Status	<del>,.</del> ;	1
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Corporate Filing Menu

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4/30/2013

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May 1, 2013

## **FLORIDA DEPARTMENT OF STATE**

Division of Corporations

MAPPRE ASSISTANCE USA INC. 7300 CORPORATE CENTER DRIVE, SUITE 601 MIAMI, FL 33126

SUBJECT: MAPPRE ASSISTANCE USA INC.

REF: 912000042944

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 filling cover sheet.

The date of adoption of each amendment must be included in the document.

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.

Carol Mustain Regulatory Specialist II PAX Aud. #: H13000097692 Letter Number: 513A00010506

RECEIVED

13 MAY - 1 MM 8: 40

P.O BOX 6327 - Tallahansee, Florida 32314

-UI-ZUIS UI:DUPM FROM-AKERMAN SENTERFITT		+3053745095	T-076	P.002/005	F-916
H13000097692 3)					
	Articles of Amen	dmest			
	to Articles of Incurp	nration .			
	of				
MAPFRE ASSISTANCE USA	INC.				
(Nume of Corporation as current	ly filed with the Florid	da Dept. of State)		<del></del>	
P12000042944				<del></del>	
(Document Numbe	er of Corporation (if kn	awn)			
Pursuant to the provisions of section 607.1006, Flo its Articles of Incorporation:	orida Statutes, this <i>Flor</i>	idu Profit Curporation add	pis the fol	lowing amend	lment(s)
A. If amending name, enter the new name of the NOT APPLICABLE	e corporation:				
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation "Cword "chartered," "professional association," or	Corp." "Inc," or "Co"	. A professional corporal	ated" or ion name	The ine approvial must comain	ion
B. Enter new principal office address, if applica	:	NOT APPLICABLE		逆	3 _
(Principal office uddress MUST BE A STREET)				SS 10	<u> </u>
	_	•			m' -
			<del></del> -		ED
C. Enter new malling address, if applicable: (Mailing address MAY BE A POST OFFICE	: BOX)	NOT APPLICABI	E j	8 29	
	_			<del></del>	
D. If amending the registered apont and/or reg new registered agent and/or the new register	ristered office address	in Florids, enter the na or	of the	<del></del>	
Name of New Registered Agent	NOT APPL	ICABLE			
Mame of New Kegisteran Agent					
Accesses 1-	(Florida street a	(ddrets)			
New Registered Office Address:	, ·	, Florida			
NEW REPRIETED OTHER AUGUSTS.	(City)	, rionda	(Zip Co	ie)	
New Registered Agent's Signature, if changing I hereby accept the appointment as registered age	Registered Agent:	and accept the obligations	of the posi	ition.	
			•		
Signarure d	of New Registered Agen	il, if changing			
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(H13000097692 3)							
If amending the Office address of each Officer (Attach additional sheets Please note the officer/d P = President; V = Vice Executive Officer; CFO held. President, Trassur Changes should be noted a change, Mike Jones le Mike Jones, V as Remov	and/or II  i, if neces: iroctor tiu  Presiden  — Chief  er, Direct  d in the fo	Pirector being addingly)  It by the first letter  It T= Treasurer: ;  Financial Officer.  or would be PTD.  Allowing manner.  corporation, Sally	ted:  r of the office title:  S= Secretary; D= Direct  If an officer/director hi  Currently John Doe is III  Smith is named the V an	ior: TR= Trusiee: C = olds more than one title sied as thi: PST and Mik	Chairman list the fi	or Clerk; CE: irst letter of e llstad as the V	O ~ Chief ach office '. There is
Example: X.Change	PT	John Doc		•			
X Remove	<u>v</u>	Mike Jones					
X Add	<u>sv</u>	Sally Smith					
Type of Action (Check One)	Title	Name		Address			
1) Change			NOT APPLICABLE	·			_
Add							_
Remove							_
2) Change			······································			,	<b>-</b>
Add						····	<del>-</del>
Remove							<del></del>
3) Change						···	-
Add					<del></del>		-
Remove					<del></del>	<del></del>	-
4)Change							_
Add					<del>,</del>		-
Remove					<u> </u>		-
5) Change					·		_
Add						·	-
Remove							-
δ) Change							_
Add							_
Remove							_
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E. If amending or adding additional Articles, enter change (Attach additional sheets, if necessary). (Be specific)  ARTICLE IV	(s) here:		
RESOLVED that the Articles of Incom	poration of the Com	pany	
be amended to increase the authoriz	ed capital of the Co	mpany to	
Thirty Four Million One Thousand 00	/xx [\$34,001,000.00	] Dollars	
to be evidenced by the issuance of t	hirty four million one	thousand	
shares of common voting stock of or	ne dollar [\$1.00] par	value.	
		<del></del>	
F. If an amendment provides for an exchange, reclassificate provisions for implementing the amendment if not con (if not applicable, indicate N/A)	tion, or cancellation of issued sha tained in the amendment itself:	ares.	
NOT APPLICABLE			

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(113000037032 3)				
The date of each amendment(s) adoption:	February 3, 2013			
Effective date if applicable:				
	(no more than 90 days after amendment file date)	·   -		
Adoption of Amendment(s) (CHE	CK ONE)			
The amendment(s) was/were adopted by the sl by the shareholders was/were sufficient for ap		mdmenI(5)		
The amendment(s) was/were approved by the must be separately provided for each voting g	shareholders through voting groups. The followin troup entitled to vote separately on the amendmen			
"The number of votes cast for the amend	ment(x) was/were sufficient for approval			
by(voiin	77			
(voin	ng group)	1		
☐ The amendment(s) was/were adopted by the basetion was not required.	oard of directors without shareholder action and si	hareholder	•	
The amendment(s) was/were adopted by the in action was not required.		noider		
Dated 4	(38/21/3			
	ent or other officer - if directors or officers have			
	porator — if in the hands of a receiver, trustee, or c by that fiduciary) — (	her court		
F∕edro`A	A. Freyre			
	yped or printed name of person signing)			
/Secreta	_ <del></del>			
•	(Title of person signing)			
	,			

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