

645072

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

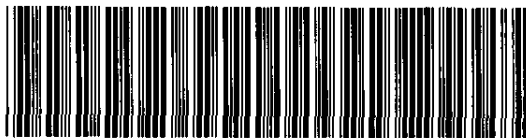
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

FILED

08 NOV -5 AM 11:31

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*Amend N.C.*  
**C.COULLETTE**

NOV 05 2008

**EXAMINER**

Coloduy	
Requester's Name	
215 S Monroe St. Ste. 701	
Address	
Tallahassee, FL	32304 728 7583
City/State/Zip	Phone #

Office Use Only

**CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):**

1. \_\_\_\_\_  
(Corporation Name) (Document #)
2. \_\_\_\_\_  
(Corporation Name) (Document #)
3. \_\_\_\_\_  
(Corporation Name) (Document #)
4. \_\_\_\_\_  
(Corporation Name) (Document #)

- ☐ Walk in    ☐ Pick up time \_\_\_\_\_    ☒ Certified Copy  
☐ Mail out    ☐ Will wait    ☐ Photocopy    ☒ Certificate of Status

**NEW FILINGS**

- ☐ Profit  
☐ Not for Profit  
☐ Limited Liability  
☐ Domestication  
☐ Other

**AMENDMENTS**

- ☐ Amendment  
☐ Resignation of R.A., Officer/Director  
☐ Change of Registered Agent  
☐ Dissolution/Withdrawal  
☐ Merger

**OTHER FILINGS**

- ☐ Annual Report  
☐ Fictitious Name

**REGISTRATION/QUALIFICATION**

- ☐ Foreign  
☐ Limited Partnership  
☐ Reinstatement  
☐ Trademark  
☐ Other

**Examiner's Initials**

APPROVED

Articles of Amendment  
to  
Articles of Incorporation  
of

NOV 4 2008

Decided by: gm

AMCOMP ASSURANCE CORPORATION

(Name of Corporation as currently filed with the Florida Dept. of State)

645072

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

EMPLOYERS ASSURANCE COMPANY

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable:  
(Principal office address MUST BE A STREET ADDRESS)

NO CHANGE

C. Enter new mailing address, if applicable:  
(Mailing address MAY BE A POST OFFICE BOX)

NO CHANGE

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent:

NO CHANGE

New Registered Office Address:

NO CHANGE

(Florida street address)

NO CHANGE

(City)

Florida

(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

\_\_\_\_\_  
Signature of New Registered Agent, if changing

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TALLAHASSEE, FLORIDA

**If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:**  
*(Attach additional sheets, if necessary)*

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	<u>SEE ATTACHED LIST</u>	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	

**E. If amending or adding additional Articles, enter change(s) here:**  
*(attach additional sheets, if necessary). (Be specific)*

N/A

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:**  
*(if not applicable, indicate N/A)*

N/A

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**EMPLOYERS ASSURANCE COMPANY**  
(formerly AmCOMP Assurance Corporation)

**Directors to be Removed**

Fredrick Ross Lowe	701 U.S. Highway 1, Suite 200 North Palm Beach, FL 33408
Debra Jane Cerre-Ruedlsill	701 U.S. Highway 1, Suite 200 North Palm Beach, FL 33408
Sam Alexander Stephens	701 U.S. Highway 1, Suite 200 North Palm Beach, FL 33408
Paul Brian Queally	701 U.S. Highway 1, Suite 200 North Palm Beach, FL 33408
Donald C. Stewart	701 U.S. Highway 1, Suite 200 North Palm Beach, FL 33408
Spencer L. Cullen Jr.	701 U.S. Highway 1, Suite 200 North Palm Beach, FL 33408

**Directors to be Added**

Robert John Kolesar Chairman of the Board	Employers Insurance Company of Nevada 10375 Professional Circle Reno, NV 89521
Douglas Dean Dirks Member of the Board	Employers Insurance Company of Nevada 10375 Professional Circle Reno, NV 89521
Lenard Thomas Ormsby Member of the Board	Employers Insurance Company of Nevada 10375 Professional Circle Reno, NV 89521
William Eric Yocke Member of the Board	Employers Insurance Company of Nevada 10375 Professional Circle Reno, NV 89521
Martin Jay Welch Member of the Board	Employers Insurance Company of Nevada 10375 Professional Circle Reno, NV 89521

The date of each amendment(s) adoption: October 31, 2008

Effective date if applicable: October 31, 2008  
(no more than 90 days after amendment file date)

Adoption of Amendment(s) (CHECK ONE)

☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.

☐ The amendment(s) was/were approved by the shareholders through voting groups. *The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):*

"The number of votes cast for the amendment(s) was/were sufficient for approval


by \_\_\_\_\_."  
(voting group)

☒ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.

☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Dated October 31, 2008

Signature

  
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

Michael T. Stock  
(Typed or printed name of person signing)

Senior Vice President, General Counsel & Secretary  
(Title of person signing)