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Corporation(s) Name

Albany Insurance Company
Chapin Nassau
Liberty Insurance Underwriters, Inc.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

<input type="checkbox"/> Profit	<input checked="" type="checkbox"/> Amendment	<input type="checkbox"/> Merger
<input type="checkbox"/> Nonprofit		
<input type="checkbox"/> Foreign	<input type="checkbox"/> Dissolution	<input type="checkbox"/> Mark
<input type="checkbox"/> LLC		
<input type="checkbox"/> Limited Partnership	<input type="checkbox"/> Annual Report	<input type="checkbox"/> Other
<input type="checkbox"/> Reinstatement	<input type="checkbox"/> Reservation	<input type="checkbox"/> Ch. RA
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RECEIVED
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DEPT. OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA
Thank You!

**APPLICATION BY FOREIGN CORPORATION TO FILE AMENDMENT TO
APPLICATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN
FLORIDA**

SECTION I (1-3 must be completed)

1. Albany Insurance Company
Name of corporation as it appears within the records of the Department of State.

2. Incorporated under laws of: New York

3. Date authorized to do business in Florida: 07-19-1925

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?

November 23, 1999

5. Name of corporation after the amendment, adding suffix "corporation," "company," "incorporated," or appropriate abbreviation, if not contained in new name of the corporation:

Liberty Insurance Underwriters Inc.

6. If the amendment changes the period of duration, indicate new period of duration.

7. If the amendment changes the jurisdiction of incorporation, indicate new jurisdiction.

James R. Pugh - Ass't Secretary
Signature
Name and Title
James R. Pugh

3/7/00
Date

CERTIFICATE OF COMPLIANCE - DOMESTIC

=====

STATE OF NEW YORK

I N S U R A N C E D E P A R T M E N T

It is hereby certified that

LIBERTY INSURANCE UNDERWRITERS INC.
of New York, New York

is duly organized under the laws of this State, and is authorized to issue policies and transact the business of accident and health, fire, miscellaneous property, water damage, burglary and theft, glass, boiler and machinery, elevator, animal, collision, personal injury liability, property damage liability, workers' compensation and employers' liability, fidelity and surety, motor vehicle and aircraft physical damage, marine and inland marine, and marine protection and indemnity insurance, as specified in paragraphs 3, 4, 5, 6, 7, 8, 9, 10, 11, 12, 13, 14, 15, 16, 19, 20, and 21 of Section 1113(a) of the New York Insurance Law, and also such workers' compensation insurance as may be incident to coverages contemplated under paragraphs 20 and 21 of Section 1113(a), including insurances described in the Longshoremen's and Harbor Workers' Compensation Act (Public Law No. 803, 69 Cong. as amended; 33 USC Section 901 et seq. as amended), with a paid-up capital of THREE MILLION FIVE HUNDRED THOUSAND DOLLARS (\$3,500,000).

In Witness Whereof, I have hereunto set my hand and
affixed the official seal of this Department
at the City of Albany, New York, this
27th day of January, 2000.

NEIL D. LEVIN

Superintendent of Insurance

BY

Frank M. D'Amico

Special Deputy Superintendent