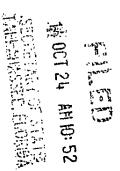
## 804819

/D.	equestor's Name)	***
971)	equestors (value)	
(Ac	ldress)	
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PICK-UP	WAIT	MAIL
(Bu	usiness Entity Name	)
(Do	ocument Number)	
	•	
Certified Copies	_ Certificates o	f Status
Special Instructions to	Filing Officer:	
1	Office Use Only	



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## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: Bituminous Casualty Corporation
DOCUMENT NUMBER: 91-36-0810360
The enclosed Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Dennis VanderVinne Name of Contact Person
BITCO General Insurance Corporation Firm/Company
320-18th Street Address
Rock Island IL 61201 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Dennis Vander Vinne at (309) 732-0302  Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$35.00 Filing Fee  \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)  \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)  \$52.50 Filing Fee, Certified Copy (Additional copy is enclosed)
Mailing Address: Amendment Section  Street Address: Amendment Section
Amendment Section  Division of Corporations  Amendment Section  Division of Corporations
P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle

Tallahassee, FL 32301

## 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)

91-36-0810360
(Document number of corporation (if known)
1. Bitumi nous Casualty Corporation
(Name of corporation as it appears on the records of the Department of State)
2. Illinois (Incorporated under laws of)  3. November 7, 1937 (Date authorized to do business in Florida)
(Incorporated under laws of) (Date authorized to do business in Florida)
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? <u>September 1, 2014</u>
5. BITCO General Insurance Corporation  (Name of corporation after the amendment, adding suffix "corpolation," "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.
(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)
Dennis Vander Vinne (Typed or printed name of person signing)  SR.V.P. + Treasurer (Title of person signing)