000118

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(Address)					
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(Business Entity Name)					
(Document Number)					
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R. WHITE

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE: 884.052 4719544

AUTHORIZATION : Symulocke man

COST LIMIT : \$ 35.00

ORDER DATE: October 25, 2017

ORDER TIME : 11:10 AM

ORDER NO. : 884052-015

CUSTOMER NO: 4719544

FOREIGN FILINGS

NAME: NEW HAMPSHIRE INSURANCE

COMPANY

<u> XX</u>	CORPORATE						
	LIMITED	PART	CNERSHIP				
	LIMITED	LIA	BILITY COM	<i>(NA</i> S	(
XXXX .	AMENDMEN	Γ					
PLEAS	E RETURN	THE	FOLLOWING	AS	PROOF	OF	FILING:

CERTIFIED COPY

XX PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Roxanne Turner -- EXT# 62969

EXAMINER:

COVER LETTER

TO: Amendment Section Division of Corporations			
SUBJECT: New Hampshire Insurance Company			
Name	of Corporation .		
DOCUMENT NUMBER: 814060			
The enclosed Amendment and fee are subm	itted for filing.		
Please return all correspondence concerning	g this matter to the following:		
Tanya E. Kent			
Name of Contact Person			
American International Group, Inc.			
Firm/Company			
175 Water Street, 15th Floor	···		
Address			
New York, NY 10038			
City/State and Zip Code			
tanya.kent@aig.com			
E-mail address: (to be used for future annu	ual report notification)		
For further information concerning this mat	ter, please call:		
Tanya E. Kent	212 458-7452		
Name of Contact Person	at () Area Code & Daytime Telephone Number		
Enclosed is a check for the following amount	nt:		
\$35.00 Filing Fee S43.75 Filing Fee & Certificate of Status			
Mailing Address:	Street Address:		
Amendment Section Amendment Section Division of Corporations Division of Corporations			
Division of Corporations 2.O. Box 6327 Division of Corporations Clifton Building			
fallahassee, FL 32314 2661 Executive Center Circle			

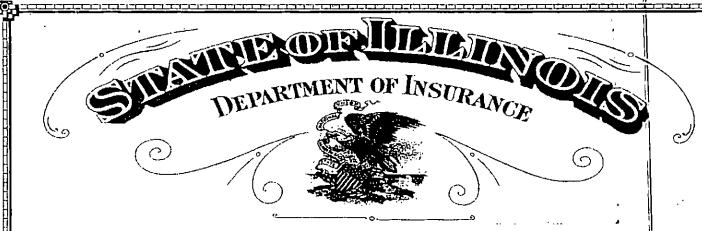
Tallahassee, FL 32301

PROFIT CORPORATION APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO APPLICATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLÖRIDA

(Pursuant to s. 607.1504, F.S.)

SECTION I (1-3 MUST BE COMPLETED)

814060			
(Document number	er of corporation (if known)		
New Hampshire Insurance Company			
(Name of corporation as it appears	s on the records of the Department of State)		
Pennsylvania 2	3. December 1, 1959		
(Incorporated under laws of)	(Date authorized to do business in	Florida)	
	CTION II y the applicable changes)		
4. If the amendment changes the name of the corporati	ion, when was the change effected under the	e laws of	
its jurisdiction of incorporation?			
5.]	
(Name of corporation after the amendment, adding appropriate abbreviation, if not contained in new n	suffix "corporation," "company," or "incorpance of the corporation)	porated, or	
(If new name is unavailable in Florida, enter alternations business in Florida) 6. If the amendment changes the period of duration, in		TS L	
	ew duration)	ZNOV <u>-3_PH</u> ECRE INVENTE LLAHASSEE FE	FILED
7. If the amendment changes the jurisdiction of incorporate Minois	oration, indicate new jurisdiction.	1:46	<u>.</u>
(Nev	v jurisdiction)	"	
3. Attached is a certificate or document of similar imposes 90 days prior to delivery of the application to the Dehaving custody of corporate records in the jurisdiction.	ort, evidencing the amendment, authenticate partment of State, by the Secretary of State on under the laws of which it is incorporated	ed not more to or other officed.	han cial
(Signature of a director, pre of a receiver or other court	sident or other officer - if in the hands appointed fiduciary, by that fiduciary)		
Tanya E. Kent	Secretary		
(Typed or printed name of person signing)	(Title of person signing)	-	



WHEREAS, NEW HAMPSHIRE INSURANCE COMPANY, located in the City of Chicago, Cook County the State of Illinois, was incorporated to the provisions of the "Illinois Insurance Code" applicable to said Company.

NOW, THEREFORE, I the undersigned Director of Insurance of the State of Illinois, do hereby certify the said Company is authorized to transact its appropriate business as set for under Clauses(s)

(a), (b), (c), (d), (e), (f), (g), (h), (i), (j) (k), (l) of Class 2

(a), (b), (c), (d), (e), (f), (g), (h) (i) of Class 3

of Section 4 of the "Illinois Insurance Code" in this State, in accordance with the laws thereof.

DEPARTMENT OF INSURANCE OF THE STATE OF ILLINOIS

DATE: October 27, 2017

Jennifer Hammer Director of Insurance

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ertificate of Compliance

COVER LETTER

TO: Amendment Section Division of Corporations					
SUBJECT:New Hampshire Insurance Company					
Name	of Corporation				
DOCUMENT NUMBER: 814060					
The enclosed Amendment and fee are subm	itted for filing.				
Please return all correspondence concerning	this matter to the following:				
Tanya E. Kent					
Name of Contact Person					
American International Group, Inc.					
Firm/Company					
175 Water Street, 15th Floor					
Address					
New York, NY 10038					
City/State and Zip Code					
tanya.kent@aig.com					
E-mail address: (to be used for future annu	ial report notification)				
For further information concerning this mat	ter, please call:				
Tanya E. Kent	212 458-7452				
Name of Contact Person	at () Area Code & Daytime Telephone Number				
Enclosed is a check for the following amoun	nt:				
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Mailing Address: Amendment Section	Street Address:				
Division of Corporations	Amendment Section Division of Corporations				
P.O. Box 6327 Clifton Building					
Tallahassee, FL 32314	2661 Executive Center Circle				

Tallahassee, FL 32301