

820053

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**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** FIRST INVESTORS LIFE INSURANCE COMPANY

\_\_\_\_\_  
Name of Corporation

**DOCUMENT NUMBER:** 820053

The enclosed Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Nicholas R. Paquette

\_\_\_\_\_  
Name of Contact Person

Foley & Lardner LLP

\_\_\_\_\_  
Firm/Company

106 E. College Ave STE 900

\_\_\_\_\_  
Address

Tallahassee, FL 32301

\_\_\_\_\_  
City/State and Zip Code

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Nicholas R. Paquette

\_\_\_\_\_  
Name of Contact Person

at ( 850 ) 513-3365

\_\_\_\_\_  
Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☐

\$35.00 Filing Fee

☒

\$43.75 Filing Fee &  
Certificate of Status

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\$43.75 Filing Fee &  
Certified Copy  
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enclosed)

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\$52.50 Filing Fee,  
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Certified Copy  
(Additional copy is  
enclosed)

**Mailing Address:**

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**

Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

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## 820053

(Document number of corporation (if known))

FIRST INVESTORS LIFE INSURANCE COMPANY

(Name of corporation as it appears on the records of the Department of State)

2 NEW YORK

(Incorporated under laws of)

2 11/15/1996

(Date authorized to do business in Florida)

4. If the amendment changes the name of the corporation, when was the change effected under the laws of its jurisdiction of incorporation? September 21, 2015

5 FORESTERS LIFE INSURANCE AND ANNUITY COMPANY

(Name of corporation after the amendment, adding suffix "corporation," "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)

CAROL E. SPRINGSTEEN

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

**SHORT CERTIFICATE**

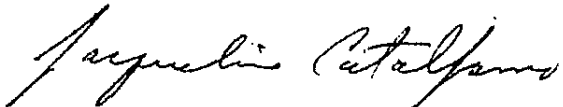
**STATE OF NEW YORK  
DEPARTMENT OF FINANCIAL SERVICES**

It is hereby certified that the attached copy of Certificate of Amendment to the Amended and Restated Charter of First Investors Life Insurance Company, of City & State of New York, to change the name of the company to Foresters Life Insurance and Annuity Company, as approved by this Department, September 21, 2015, pursuant to Section 1206 of the New York Insurance Law,

has been compared with the original on file in this Department and that it is a correct transcript therefrom and of the whole of said original.



In Witness Whereof, I have here-  
unto set my hand and affixed  
the official seal of this Department  
at the City of Albany, this  
21st day of September, 2015.

  
Jacqueline Catalfamo  
Special Deputy Superintendent

**CERTIFICATE OF AMENDMENT**  
**TO THE**  
**AMENDED AND RESTATED CHARTER**  
**OF**  
**FIRST INVESTORS LIFE INSURANCE COMPANY**

Pursuant to the provisions of Section 1206 of the Insurance Law of the State of New York and Section 805 of the Business Corporation Law of the State of New York, the undersigned President and Secretary of First Investors Life Insurance Company (the "Company") hereby certify:

**FIRST**: The name of the corporation is First Investors Life Insurance Company.

**SECOND**: The Charter of the Company was filed and the Company incorporated by the Department of Insurance on August 3, 1962.

**THIRD**: Existing Article I of the corporation's Amended and Restated Charter is amended to change the name of the Company, and as amended shall read, in its entirety, as follows:

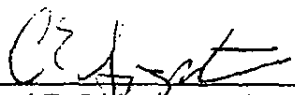
**ARTICLE I**

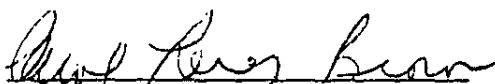
The name of this corporation shall be FORESTERS LIFE INSURANCE AND ANNUITY COMPANY.

**FOURTH**: The Certificate of Amendment to the Amended and Restated Charter was authorized by the vote of the Board of Directors of the Company and approved by a vote of the sole shareholder of the Company pursuant to consent of the sole shareholder on and as of August 10, 2015.

**FIFTH**: Except as amended hereby the provisions of the Amended and Restated Charter shall remain in full force and effect.

IN WITNESS WHEREOF, we have subscribed this document on the date set forth below and do hereby affirm under the penalties of perjury that the statements contained therein have been examined by us and are true and correct.

  
\_\_\_\_\_  
Carol E. Springsteen, President

  
\_\_\_\_\_  
Carol Lerner Brown, Secretary

Dated this 10th day of August, 2015.