Division of Corporations



(1/4)

Page 1 of 1

### Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 : (850)222-1092 Phone

Fax Number : (850)878-5368

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

### COR AMND/RESTATE/CORRECT OR O/D RESIGN PMI MORTGAGE ASSURANCE CO.

Certificate of Status	1
Certified Copy	0
Page Count	04
Estimated Charge	\$43.75

Electronic Filing Menu

Corporate Filing Menu

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#### **COVER LETTER**

TO: Amendment Section Division of Corporatio	ns
SUBJECT:	PMI MORTGAGE ASSURANCE CO.
	Name of Corporation
DOCUMENT NUMBER:	
The enclosed Amendment and	fee are submitted for filing.
Please return all corresponden	ce concerning this matter to the following:
C T CORPORATION SYSTEM	
Name of Con	tact Person
PMI MORTGAGE ASSURANCE	co.
Firm/Co	···
Addr	ess
City/State ar	nd Zip Code
E-mail address: (to be used	for future annual report notification)
For further information concer	ming this matter, please call:
Name of Contact Perso	on Area Code & Daytime Telephone Number
Evaluation should for the fol	
Enclosed is a check for the fol	lowing muonur:
535.00 Filing Foc \$4	33.75 Filing Fee & Cartificate of Status  S43.75 Filing Fee & Cartificate of Status  Cartificate of Status  (Additional copy is enclosed)  S52.50 Filing Fee & Cartificate of Status & Cartificate of Status & Cartified Copy (Additional copy is enclosed)
Mailing Address.	Compat & Adminus
Mailing Address: Amendment Section	Street Address: Amendment Section
Division of Corporations	Division of Corporations
P.O. Box 6327 Tallshassec, FL 32314	Clifton Building 2661 Executive Center Circle
1 anama3855. FL 32317	2001 EXECULAS CELLES CITCE

Tallahassee, FL 32301

FILED

14 APR 15 AM 10: 28

SECRETARY OF STATE MALLAHASSEE, FLORIDA

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

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

SECTION I (1-3 MUST BE COMPLETED)

	Document number of corporation (if known)
PMI Mortgage Assurance Co.	
(Name of corpor	stion as it appears on the records of the Department of State)
Arizona (Incorporated under laws	3. 2/2/1972 (Date authorized to do business in Florida)
(4-7 co	SECTION II OMPLETE ONLY THE APPLICABLE CHANGES)
	of the corporation, when was the change effected under the laws of
its jurisdiction of incorporation?	<u> 219114</u>
Arch Mortgage Guaranty Company	·
	dment, adding suffix "corporation," "company," or "incorporated," or mined in new name of the corporation)
	dment, adding suffix "corporation," "company," or "incorporated," or mined in new name of the corporation)
(Name of corporation after the amend appropriate abbreviation, if not cont Not Applicable	
(Name of corporation after the amend appropriate abbreviation, if not cont Not Applicable (If new name is unavailable in Florida business in Florida)	
(Name of corporation after the amend appropriate abbreviation, if not cont Not Applicable (If new name is unavailable in Florida business in Florida)  If the amendment changes the period	a, enter alternate corporate name adopted for the purpose of transacting of duration, indicate new period of duration.
(Name of corporation after the amend appropriate abbreviation, if not cont Not Applicable (If new name is unavailable in Florida business in Florida)	of duration, indicate new period of duration.
(Name of corporation after the amend appropriate abbreviation, if not cont Not Applicable  (If new name is unavailable in Florida business in Florida)  If the amendment changes the period Not App	a, enter alternate corporate name adopted for the purpose of transacting of duration, indicate new period of duration.
(Name of corporation after the amend appropriate abbreviation, if not cont Not Applicable  (If new name is unavailable in Florida business in Florida)  i. If the amendment changes the period Not App	of duration, indicate new period of duration.  (New duration)  ction of incorporation, indicate new jurisdiction.
(Name of corporation after the amend appropriate abbreviation, if not contemporaries in Florida business in Florida)  i. If the amendment changes the period Not Apple.  If the amendment changes the jurisdiction Not Apple.	of duration, indicate new period of duration.  (New chiration)  ction of incorporation, indicate new jurisdiction.  (New jurisdiction)
(Name of corporation after the amend appropriate abbreviation, if not contemporaries in Florida business in Florida)  If the amendment changes the period Not App.  If the amendment changes the jurisdiction Not App.  Mot App.  Mot App.  Mot App.	of duration, indicate new period of duration.    Comparison   Comparison



# STATE OF ARIZONA



### Office of the CORPORATION COMMISSION

TO ALL TO WHOM THESE PRESENTS SHALL COME, GREETING:

THE EXECUTIVE DIRECTOR OF THE ARIZONA CORPORATION COMMISSION DOES HEREBY CERTIFY THAT THE RECORDS IN THIS OFFICE SHOW:

\*\* PMI MORTGAGE ASSURANCE CO.. \*\*

WAS INCORPORATED ON THE 21ST DAY OF DECEMBER, 1966.

I FURTHER CERTIFY THAT THE ABOVE NAMED CORPORATION CHANGED ITS NAME TO:

\*\* ARCH MORTGAGE GUARANTY COMPANY. \*\*

ON THE 19th DAY OF FEBRUARY 2014, AS PROVIDED BY LAW.

IN WITNESS WHEREOF, I have herounto set my hund and affixed the official seal of the Arisona Corporation Commission. Done at Phoenix, Capital, this 10 Day of April, 2014 A.D.



Jerich, Secutive Director

Mary 198