

832057

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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*Name
Change
Amend*

DEPT. OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

06 NOV 15 AM 10:50

RECEIVED

DEPT. OF STATE
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2006 NOV 15 PM 12:41

FILED

DR
11/15/06



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 593483 7329165

AUTHORIZATION :

COST LIMIT : \$ 35.00

[Handwritten signature]

ORDER DATE : November 11, 2006

ORDER TIME : 10:21 AM

ORDER NO. : 593483-025

CUSTOMER NO: 7329165

FOREIGN FILINGS

NAME: ACORDIA OF MINNESOTA, INC.

XXXX AMENDMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Doreen Wallace -- EXT# 2928

EXAMINER: _____

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.)

FILED
2006 NOV 15 PM 2:41
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SECTION I
(1-3 MUST BE COMPLETED)

832057

(Document number of corporation (if known))

1. Acordia of Minnesota, Inc.
(Name of corporation as it appears on the records of the Department of State)
2. Minnesota 3. 3-26-1974
(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? 11-2-06

5. Wells Fargo Insurance Services of Minnesota, Inc.
(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)

Robert M. Greco
(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)

Robert M. Greco

(Typed or printed name of person signing)

Secretary

(Title of person signing)

State of Minnesota

SECRETARY OF STATE

Certificate of Name Change

I, Mary Kiffmeyer, Secretary of State of Minnesota, do certify that the corporation listed below filed an amendment of its articles of incorporation, or, in the case of a non-Minnesota corporation, a certificate of name change, changing its name with this office on the date listed below, and that the corporation has complied with the relevant laws of Minnesota with respect to that filing.

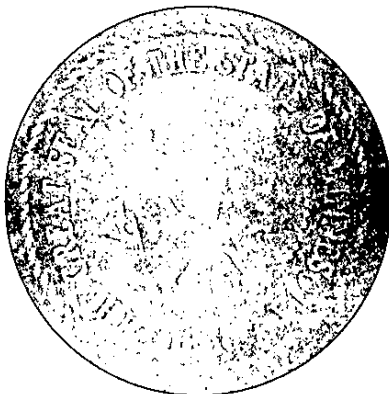
Old Name: Acordia of Minnesota, Inc.

New Name: Wells Fargo Insurance Services of Minnesota, Inc.

State of Incorporation: MN

Date Amendment filed: 11/02/2006

This certificate has been issued on 11/13/06.



Mary Kiffmeyer
Secretary of State.