

837337

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

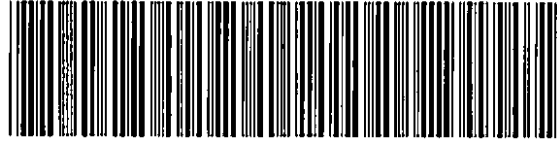
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

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**CT CORP****3458 Lakeshore Drive, Tallahassee, FL 32312  
850-656-4724****Date:** 12/27/2018

Acc#I20160000072

DEC 27 PM 4:24  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
*W: C SW*

Name:	MAPFRE LIFE INSURANCE COMPANY
Document #:	
Order #:	11348398

Certified Copy of Arts & Amend:	<input type="checkbox"/>		
Plain Copy:	<input type="checkbox"/>		
Certificate of Good Standing:	<input type="checkbox"/>		
	<input type="checkbox"/>		
Apostille/Notarial Certification:	<input type="checkbox"/>	Country of Destination:	
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Amount: \$ **43.75****Thank you!**

## COVER LETTER

TO: Amendment Section  
Division of Corporations

2010 DEC 27 PM 4:24

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

SUBJECT: MAPFRE LIFE INSURANCE COMPANY

Name of Corporation

DOCUMENT NUMBER: 837337

The enclosed Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Name of Contact Person

Firm/Company

Address

City/State and Zip Code

msher@mapfreusa.com

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

For further information concerning this matter, please call:

Casey O'Donnell

at ( 856 ) 216-0220

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 &  
Certificate of Status

☐ \$43.75 Filing Fee &  
Certified Copy  
(Additional copy is  
enclosed)

☐ \$52.50 Filing Fee,  
Certificate of Status &  
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

**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.)

2018 DEC 27 PM 4: 24  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**SECTION I**  
**(1-3 MUST BE COMPLETED)**

837337

(Document number of corporation (if known))

1. MAPFRE Life Insurance Company

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

2. Delaware

(Incorporated under laws of)

3. 11/4/1976

(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? 11/27/2018

5. Elips Life Insurance 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)

Not Applicable

(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.

Not Applicable

(New duration)

7. If the amendment changes the jurisdiction of incorporation, indicate new jurisdiction.

Missouri

(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.

Elissa Kenny

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

Elissa Kenny

(Typed or printed name of person signing)

Secretary

(Title of person signing)

# STATE OF MISSOURI



John R. Ashcroft  
Secretary of State

## CERTIFICATE OF CONVERSION

WHEREAS, a Certificate of Conversion of the following entity:

**MAPFRE LIFE INSURANCE COMPANY - 000001845**  
CONVERTING INTO:  
**ELIPS LIFE INSURANCE COMPANY - 1001401453**

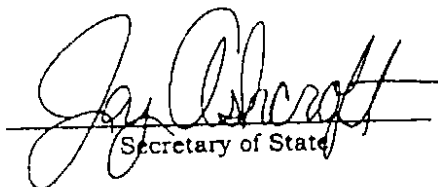
Organized and existing under the laws of Missouri have been received, found to conform to Law and filed.

NOW, THEREFORE, I, Missouri, Secretary of State of the State of Missouri, issue the Certificate of Conversion, certifying that the conversion of the aforementioned entity is effected, with

**ELIPS LIFE INSURANCE COMPANY - 1001401453**

As the newly formed entity, pursuant to Chapter 376 RSMO.

IN TESTIMONY WHEREOF, I hereunto set my hand and cause to be affixed the GREAT SEAL of the State of Missouri. Done at the City of Jefferson, this 27th day of November, 2018.

  
Secretary of State

