

839686

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

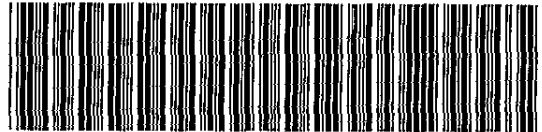
(Business Entity Name)

(Document Number)

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

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200022980482

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

03 SEP 22 PM 1:07

FILED

9/22/03  
NIC Amend  
38

STATE OF FLORIDA

## VOUCHER SCHEDULE

DATE 09/11/2003

S-W/Agency Voucher

OLO 430000

JT-2

D40-0012-773

DEPARTMENT DEPARTMENT OF FINANCIAL SERVICES

002488

SITE DEPT. OF FINANCIAL SERVICES - DISBURSEMENTS

CFO ACCOUNT NUMBER	CF	OBJECT CODE	TRANS CODE	TRANS CODE
			25	45
INVOICE	INVOICE AMOUNT		INCREASE AMOUNT	INCREASE AMOUNT
43102393001-4301010000-22003000		8600	43.75	
INSURANCE REGULATORY TF				
REFUND NONSTATE REVENUES				
INV: COR013	43.75			
45101000132-4530010000-00010000				43.75
GENERAL REVENUE FUND				
FEES				
TRANSACTION TYPE: JOURNAL ADVICE			TOTAL	TOTAL
			43.75	43.75

I hereby certify that the above transactions are in accordance with the Florida Statutes and all applicable laws and rules of the State of Florida.

For CFO Use Only

Time In

APPROVED:

Audited By

TITLE

Allianz Insurance Company

July 30, 2003

Secretary of State  
Attention: Corporations  
409 East Gaines  
Tallahassee, FL 32399

RE: Name Change

Allianz Insurance Company, NAIC #35300

NAIC Group Name: Allianz Insurance Group, NAIC #0761

FEIN #95-3187355

Allianz Insurance Company received approval on July 9, 2003 from the California Department of Insurance to change its name to Allianz Global Risks US Insurance Company.

We are a California domiciled company requesting a change in name in order to bring our name recognition in line with the global presence of our parent company and international partners. Allianz provides coverage for both domestic and international risks.

Our management structure remains the same. There have been no acquisitions or mergers nor any change to our business plan.

Current Name: Allianz Insurance Company  
New Name: Allianz Global Risks US Insurance Company

The following address is our home and administrative office address as well as the primary location of our books and records. This address is that shown on our annual statement:

Street Address: 2350 Empire Avenue, Burbank, CA 91504  
Mailing Address: P. O. Box 7780, Burbank, CA 91510

Please review and provide us with your approval. I have included an additional \$8.75 for a Certificate reflecting the name change to be used with my Department of Insurance filing.

Enclosed please find our check in the amount of \$43.75, Application by Foreign Profit Corporation to File Amendment to Application for Authorization to Transact Business in Florida, approval letter and Certificate of Authority from California Department of Insurance, as well as a stamped, self-addressed envelope.

If you have any questions, please do not hesitate to contact Carolyn Calvo at (800) 421-0504, ext. 7502 or (818) 260-7502 or by email at ccalvo@aic-allianz.com.


Sincerely,

*Marion E. Graham*

Marion E. Graham  
Director, Corporate Affairs

enclosures

Actuarial and Corporate Affairs  
2350 Empire Avenue  
Burbank, California 91504-3350  
Phone (818) 260-7500  
Fax (818) 260-7356

8-28-03  
To: Receipts  
FR: Phil Arnold - P&C Solvency 413-5  
Allianz   
This appears to be  
mail & money that should  
have gone to the FL Secretary of  
State. They (may) need to be refun  
to Sec. E. for Sec of state?  
THANKS!  
AUG 28 2003  
OFFICE OF THE CHIEF  
P&C INSURER SOLVENCY

**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.)

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

814291  
(Document number of corporation (if known))

1. Allianz Insurance Company  
(Name of corporation as it appears on the records of the Department of State)
2. California 3. 12/16/77  
(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? July 9, 2003
5. Allianz Global Risks US 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)
6. If the amendment changes the period of duration, indicate new period of duration.  
N/A  
(New duration)
7. If the amendment changes the jurisdiction of incorporation, indicate new jurisdiction.  
N/A  
(New jurisdiction)

K. Callahan  
(Signature of the chairman or vice chairman of the board, president, or any officer, or if the corporation is in the hands of a receiver, trustee, or other court-appointed fiduciary, by that fiduciary)

July 29, 2003  
(Date)

Kevin Richard Callahan President  
(Typed or printed name) (Title)

FILED  
03 SEP 22 PM 1:07  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

# STATE OF CALIFORNIA DEPARTMENT OF INSURANCE

San Francisco

I, JOHN GARAMENDI, Insurance Commissioner of the State of California, do hereby certify that on the date specified herein, the name **Allianz Global Risks US Insurance Company** has been approved and reserved in California as a name change for **Allianz Insurance Company** for a period of 90 days from the date herein.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal the day and year specified below.

JOHN GARAMENDI  
Insurance Commissioner

By



Pamela D. Stefani  
Senior Legal Analyst  
On Behalf Of  
Ida T. Zodrow  
Acting Chief Deputy  
April 7, 2003

A California corporation must attach this Certificate to its Articles of Incorporation (Amendment) filed with the California Secretary of State.

Note: This certificate does not authorize the subject entity to transact business in California unless and until a Certificate of Authority or license has been issued.

Amended  
Certificate of Authority

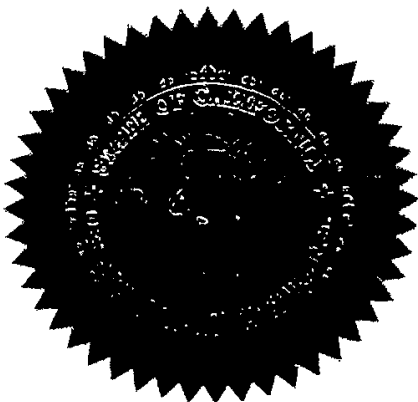
THIS IS TO CERTIFY THAT, Pursuant to the Insurance Code of the State of California,

Allianz Global Risks US Insurance Company

of Burbank, California, organized under the  
laws of California, subject to its Articles of Incorporation or  
other fundamental organizational documents, is hereby authorized to transact within the State, subject to  
all provisions of this Certificate, the following classes of insurance: Fire, Marine,  
Surety, Disability, Plate Glass, Liability, Workers' Compensation,  
Common Carrier Liability, Boiler and Machinery, Burglary, Credit,  
Sprinkler, Team and Vehicle, Automobile, Aircraft, and Miscellaneous  
as such classes are now or may hereafter be defined in the Insurance Laws of the State of California.

THIS CERTIFICATE is expressly conditioned upon the holder hereof now and hereafter being in  
full compliance with all, and not in violation of any, of the applicable laws and lawful requirements made  
under authority of the laws of the State of California as long as such laws or requirements are in effect  
and applicable, and as such laws and requirements now are, or may hereafter be changed or amended.

IN WITNESS WHEREOF, effective as of the 9th  
day of July, 2003, I have hereunto  
set my hand and caused my official seal to be affixed this  
9th day of July, 2003.



By

John Garamendi  
Insurance Commissioner

Victoria S. Sidbury  
for Ida Zodrow  
Acting Chief Deputy

**NOTICE:**

Qualification with the Secretary of State must be accomplished as required by the California Corporations Code promptly after issuance of this Certificate of Authority. Failure to do so will be a violation of Insurance Code Section 701 and will be grounds for revoking this Certificate of Authority pursuant to the covenants made in the application therefor and the conditions contained herein.