

844935

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

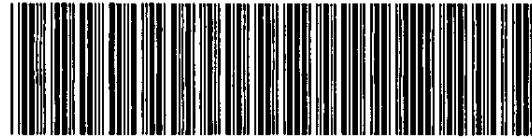
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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09/09/13--01014--002 **25.00

10/04/13--01021--004 **10.00

[Handwritten signature]

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

OCT -4 AM 9:41

FILED

OCT -7 2013

R. WHITE



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 12, 2013

LICENSING PROFESSIONALS

** Resubmitted 9/26/13 **

PO BOX 566
LYNDEN, WA 98264

SUBJECT: CHARTIS AEROSPACE INSURANCE SERVICES, INC.
Ref. Number: 844935

We have received your document for CHARTIS AEROSPACE INSURANCE SERVICES, INC. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The filing fee for articles of amendment is \$35.00. Therefore, an additional fee of \$10.00 is required for this filing.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Rebekah White
Regulatory Specialist II

Letter Number: 813A00021484

RECEIVED
13 SEP 30 AM 8:46
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 12, 2013

LICENSING PROFESSIONALS

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Rebekah White
Regulatory Specialist II

Letter Number: 813A00021484



LICENSING PROFESSIONALS

Insurance Compliance Service
P.O. Box 566, Lynden WA 98264
Toll Free: (888) 543-5432
Fax: (360) 933-1991
Email: hflores@licensingpros.com

MEMO

DATE: September 4, 2013

TO: Florida Secretary of State
PO Box 6327
Tallahassee, FL 32314

FROM: Heather Flores

SUBJECT: Business Entity Name Change
Chartis Aerospace Insurance Services, Inc.

Submitted for your approval is the request to change *Chartis Aerospace Insurance Services, Inc.*'s name in Florida to *AIG Aerospace Insurance Services, Inc.* Attached is the following:

- Application for Amended Certificate of Authority
- Certificate of Change from Georgia
- Check in the amount of \$25.00 made payable to:

Florida Secretary of State
PO Box 6327
Tallahassee, FL 32314

If you require any additional information to process this request, please contact Licensing Professionals at (888) 543-5432 as they are contracted to help with this request.

Thank you.

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
OCT -4 AM 9:41
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SECTION I
(1-3 MUST BE COMPLETED)

844935

(Document number of corporation (if known))

1. Chartis Aerospace Insurance Services, Inc.

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

2. Georgia

(Incorporated under laws of)

3. 01/02/1980

(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? 08/02/2013

5. AIG Aerospace Insurance Services, 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)

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.

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

Tyra Williams

(Typed or printed name of person signing)

Vice President

(Title of person signing)

STATE OF GEORGIA

Secretary of State
Corporations Division
313 West Tower
#2 Martin Luther King, Jr. Dr.
Atlanta, Georgia 30334-1530

CERTIFICATE OF NAME CHANGE

I, **Brian P. Kemp**, The Secretary of State and the Corporation Commissioner of the State of Georgia, hereby certify under the seal of my office that

CHARTIS AEROSPACE INSURANCE SERVICES, INC.

Name Changed To

AIG AEROSPACE INSURANCE SERVICES, INC.

is hereby issued a CERTIFICATE OF NAME CHANGE under the laws of the State of Georgia on August 02, 2013 by the filing of all documents in the Office of the Secretary of State and by the paying of all fees as provided by Title 14 of the Official Code of Georgia Annotated.

WITNESS my hand and official seal in the City of Atlanta and the State of Georgia on August 02, 2013



B. P. Kemp

Brian P. Kemp
Secretary of State