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$SUNSHINE \ {\it corporate \& filing services, inc.}$

3458 Lakeshore Drive Tallahassee, Florida 32312 (850) 656-4724

· · · · ·					
COVER LETTER DATE: <u>10-8-15</u> WALK IN					
NAME: Ohe Nation Insurance Company					
(NAME AVAILABLE? YES CORRECT FORM? YES)					
PLEASE FILE THE ATTACHED AND RETURN: PLAIN COPY					
CERTIFIED COPY					
CHECK # AMOUNT: 43.75					
PLEASE CONTACT TINA AT 850-508-1891 WITH ANY QUESTIONS OR CORRECTIONS!					
THANK YOU!					

SUNSHINE CORPORATE & FILING SERVICES, INC.

TINA GOFF, PRESIDENT

COVER LETTER

Division of Corporations				
OneNation Insurance Company SUBJECT:				
	of Corporation			
DOCUMENT NUMBER: 850084				
The enclosed Amendment and fee are subm	itted for filing.			
Please return all correspondence concerning	this matter to the following:			
Margaret Alexander				
Name of Contact Person				
Bass, Berry & Sims PLC				
Firm/Company				
150 3rd Avenue South Ste 2800				
Address				
Nashville, TN 37201				
City/State and Zip Code				
scott.dickison@fmc-na-icg.com				
E-mail address: (to be used for future annu	ual report notification)			
For further information concerning this mat	ter, please call:			
Name of Contact Person	at () Area Code & Daytime Telephone Number			
Enclosed is a check for the following amount	nt:			
\$35.00 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	Street Address: Amendment Section			
Division of Corporations	Division of Corporations			
P.O. Box 6327	Clifton Building			
Fallahassee, FL 32314 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.)

SECTION I (1-3 MUST BE COMPLETED)

(1-5 MO)	OT DE COMIT DE LE	<i>D</i>		
850084				
(Document num	ber of corporation (i	f known)		
OneNation Insurance Company				
(Name of corporation as it appe	ars on the records of	the Department of State)		
Indiana	3	08/18/1981		
(Incorporated under laws of)		Date authorized to do business	in Florida)	
(4-7 COMPLETE ONI		ŕ		
. If the amendment changes the name of the corpora its jurisdiction of incorporation? August 18, 2015	ation, when was t	ne change effected under t	ne laws of	
Fresenius Health Plans Insurance Company				
(Name of corporation after the amendment, adding appropriate abbreviation, if not contained in new	g suffix "corpora name of the corp	ion," "company," or "inco poration)	orporated," or	
(If new name is unavailable in Florida, enter altern business in Florida)	ate corporate nar	ne adopted for the purpose	of transacting	 g
i. If the amendment changes the period of duration,	indicate new peri	od of duration.	SECREUS? TALLAHASS	इंटि. । उ
	New duration)		用二	777
. If the amendment changes the jurisdiction of incomme	rporation, indicat	e new jurisdiction.	FLOAM FLOAM	PH 2: 3
7)	lew jurisdiction)		9 m	39
3. Attached is a certificate or document of similar in 90 days prior to delivery of the application to the l having custody of corporate records in the jurisdiction of a director, and the corporate records in the jurisdiction of a director, and the corporate records in the jurisdiction of a director, and the corporate records in the corporate r	president or other of	icer - if in the hands	ated not more ite or other off ited.	than ficial
of a receiver or other col William P. McKinney	ит арбони са ладев	CEO and President		
(Typed or printed name of person signing)		(Title of person signing)		

INDIANA SECRETARY OF STATE BUSINESS SERVICES DIVISION CORPORATIONS CERTIFIED COPIES

INDIANA SECRETARY OF STATE BUSINESS SERVICES DIVISION 302 West Washington Street, Room E018 Indianapolis, IN 46204

http://www.sos.in.gov

October 07, 2015

Company Requested:

FRESENIUS HEALTH PLANS INSURANCE COMPANY

Control Number:

2003102300454

Date

Transaction

Pages

08/18/2015

Amended and Restated Articles

9



State of Indiana
Office of the Secretary of State

I hereby certify that this is a true and complete copy of this 9 page document filed in this office.

Dated: October 07, 2015

Certification Number: 2015100785970

Corrie Lawson

Connie Lawson

APPROVED

Indiana Secretary of State Packet: 2003102300454 Filing Date: 08/18/2015 Effective Date: 08/18/2015

JUL 3 0 2015 ARTICLES OF AMENDMENT AND RESTATEMENT OF THE

HEGETYEN .

STATE OF INDIANA DEPT, OF INSURANCE ARTICLES OF INCORPORATION

2015 AUG 18 AM 9: 12

OF

ONENATION INSURANCE COMPANY an Indiana Insurance Company APPROVED AND

insurance company, desires to give notice of an amendment and restatement of light whites of Incorporation in order to reflect changes made following its recent acquisition. The Corporation hereby files these Articles of Amendment and Restatement with the Indiana Department of Insurance and sets forth the following facts:

Article I Amendment and Restatement of the Articles of Incorporation

Section 1. The Corporation was incorporated on November 6, 1974.

Section 2. The name of the Corporation is currently OneNation Insurance Company. Upon the effectiveness of these Amended and Restated Articles of Incorporation, the name of the Corporation will be Fresenius Health Plans Insurance Company.

Section 3. Upon the effectiveness of these Articles of Amendment and Restatement, the Corporation's Articles of Incorporation shall be amended and restated in their entirety in the form attached hereto and marked Exhibit A (the "Amended and Restated Articles").

Article II Effective Time

The Amended and Restated Articles shall be effective upon the issuance of the Corporation's amended Certificate of Authority by the Indiana Department of Insurance.

Article III Manner of Adoption and Vote

Section 1. Action by Directors. The Board of Directors of the Corporation, by unanimous written consent dated June 10, 2015, in lieu of a special meeting, adopted resolutions setting forth the Amended and Restated Articles and directing that the Amended and Restated Articles be submitted to a vote of the sole shareholder.

Section 2. Action by Sole Shareholder. The sole shareholder of the Corporation, holding all of the issued and outstanding shares of the Corporation's voting stock, acting by unanimous written consent dated <u>June 11</u>, 2015, adopted resolutions approving the Amended and Restated Articles.

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Page 2 of 10

Certification Number: 2015100785970

Indiana Secretary of State Packet: 2003102300454 Filing Date: 08/18/2015 Effective Date: 08/18/2015

Section 3. Compliance with Legal Requirements. The manner of the adoption of the resolutions approving the adoption of the Amended and Restated Articles and the written consents by which such resolutions were adopted constitute full legal compliance with the provisions of the Indiana Law, and the Corporation's Articles of Incorporation and Bylaws.

IN WITNESS WHEREOF, the undersigned officers of the Corporation executed these Articles of Amendment and Restatement of the Articles of Incorporation of OneNation Insurance Company and certify to the truth of the facts herein stated, this 12 th day of June, 2015.

ONENATION INSURANCE COMPANY

illam McKinney-President

Douglas Katt Secretary

US.57404955.02

Indiana Secretary of State Packet: 2003102300454 Filing Date: 08/18/2015 Effective Date: 08/18/2015

STATE OF MASSACHUSETTS)
)
COUNTY OF MIDDLESEX }

I, the undersigned, a Notary Public duly commissioned to take acknowledgments and administer oaths in the foregoing State, hereby certify that Douglas Kott, Secretary of OneNation Insurance Company, personally appeared before me, acknowledged execution of the foregoing Articles of Amendment and Restatement of the Articles of Incorporation of OneNation Insurance Company and swore to the truth of the facts therein contained.

WITNESS my hand and Notarial Scal this 11th day of Une 2015.

)

Name Printed

JENNIFER E. ROSA
Notary Public
Commonwealth of Massachusetts
My Commission Expires
January 21, 2016

My Commission Expires:

My County of Residence:

U\$.57404955.02

Indiana Secretary of State Packet: 2003102300454 Filing Date: 08/18/2015 Effective Date: 08/18/2015

STATE OF TEXAS

COUNTY OF ITEAU'S

I, the undersigned, a Notary Public duly commissioned to take acknowledgments and administer oaths in the foregoing State, hereby certify that William McKinney, the President of OneNation Insurance Company, personally appeared before me, acknowledged execution of the foregoing Articles of Amendment and Restatement of the Articles of Incorporation of OneNation Insurance Company and swore to the truth of the facts therein contained.

WITNESS my hand and Notarial Seal this 12th day of Johe, 2015.

GREGG FARRAR
Notary Public, State of Texas
My Commission Expires
April 19, 2017

Notary Public

CTIEGG PAR

My County of Residence:

My Conunission Expires: Αρτί 19, 2017

[Notary Page for Articles of Amendment - McKinney]

US.57562155.01

Indiana Secretary of State Packet: 2003102300454 Filing Date: 08/18/2015 Effective Date: 08/18/2015

AMENDED AND RESTATED

HECEIVE:

ARTICLES OF INCORPORATION

2015 AUG 18 AM 9: 12

OF

Frescaius Health Plans Insurance Company

Preamble

Fresenius Health Plans Insurance Company (hereinafter referred to as the "Corporation"), duly existing under the Indiana Insurance Law, desires to amend and restate its articles of incorporation as follows:

The Corporation was incorporated on November 6, 1974 under the laws of the State of Texas under the name of Republic Industrial Life Insurance Company. On December 31, 1980, the Corporation's name was changed to Republic National Life Group Insurance Company. On August 6, 1985, the Corporation's name was changed to American General Group Insurance Company. On July 19, 1990, the Corporation's name was changed to Anthem Life Insurance Company. On April 21, 1998, the Corporation's name was changed to Anthem Alliance Health Insurance Company. In 2003, the Corporation was redomesticated to the State of Indiana, and the Corporation's name was changed to OneNation Insurance Company. With this filing, the Corporation changes its name to Fresenius Health Plans Insurance Company.

ARTICLE ONE

NAME OF THE CORPORATION

The name of the Corporation shall be:

Frescnius Health Plans Insurance Company

ARTICLE TWO

ADDRESS AND REGISTERED AGENT

The post office address of the Corporation's principal office in the State of Indiana at the time of the effectiveness of these Amended and Restated Articles of Incorporation is 1320 City Center Drive, Suite 250, Carmel, IN 46032. The name and address of the Corporation's registered agent at the time of the effectiveness of these Amended and Restated Articles of Incorporation is CT Corporation System, 150 W. Market St., Suite 800, Indianapolis, IN, 46204.

ARTICLE THREE

PURPOSES AND POWERS; BUSINESS PLAN OR PRINCIPLES

US.57535844.03

Page 6 of 10 Certification Number: 2015100785970

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Section 3.01. Purposes. The Corporation was formed for the purpose of conducting the business of, and acting as, a stock insurance company with the power to write such kinds of insurance and reinsurance as are comprised under Class I(a) and Class I(b) of § 27-1-5-1 of the Insurance Code and to do all things necessary, convenient or expedient for carrying on the business of such an insurance company or any other business related thereto.

Section 3.02. Powers. The Corporation shall have and may exercise all of the rights, privileges and powers set forth in § 27-1-7-2 of the Insurance Code and as otherwise authorized by the Insurance Code and shall have the power to do all acts and things necessary, convenient or expedient to carry out the purposes for which it was formed.

Section 3.03 Plan or Principle. The plan or principle upon which the business of the Corporation is formed is to insure the lives of persons, transact credit life, health and accident insurance business, and to engage in any lawful activity as may be permitted a corporation of this kind by law and not prohibited by laws of Indiana or other states.

ARTICLE FOUR

PERIOD OF EXISTENCE

The term for which the Corporation is to continue as a corporation shall be perpetual.

ARTICLE FIVE

INCORPORATORS, FIRST OFFICERS AND DIRECTORS

The names, occupations and post office addresses of the Incorporators, first Officers and first Directors of the Corporation at the time of the original incorporation on November 6, 1974 are included within the original incorporation documents of the Corporation, which are hereby incorporated by reference.

ARTICLE SIX

CAPITAL

The number of shares of common stock, which the Corporation shall have authority to issue, is 30,000, with a par value of \$100.00 per share, 25,000 of which are issued and outstanding at the time of adoption of these Amended Articles. At the time of adoption of these Amended Articles, the Corporation has paid-in capital of \$2,500,000 and surplus of not less than \$250,000.

ARTICLE SEVEN

MEETINGS OF THE STOCKHOLDERS

Meetings of the stockholders shall be held at such time and place, either within or without the State of Indiana, as the By-Laws require.

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US.57535844.01

Indiana Secretary of State Packet: 2003102300454 Filing Date: 08/18/2015 Effective Date: 08/18/2015

ARTICLE EIGHT

VOTING

Cumulative voting of shares of stock for election of Directors of the Corporation is expressly prohibited.

ARTICLE NINE

AMEND, CHANGE OR REPEAL PROVISIONS OF THE ARTICLES OF INCORPORATION

The Corporation reserves the right to amend, alter, change or repeal any provisions contained in these Amended Articles in the manner now or hereinafter prescribed herein and by the laws of the State of Indiana, and all rights conferred upon stockholders herein are granted subject to this reservation.

ARTICLE TEN

DATE OF ADOPTION

These Amended and Restated Articles of Incorporation were adopted by the Board of Directors of the Corporation on June 10, 2015, and shall be effective upon the issuance of the Corporation's amended Certificate of Authority by the Indiana Department of Insurance.

ARTICLE ELEVEN

MANNER OF ADOPTION AND VOTE

The Board, by unanimous written consent, duly adopted resolutions setting forth the proposed Amended and Restated Articles of Incorporation and directing that the same be submitted to a vote of the sole shareholder. The sole shareholder of the Corporation, by written consent, adopted the proposed Amended and Restated Articles of Incorporation.

-3-

US.57535844.01

Indiana Secretary of State Packet: 2003102300454 Filing Date: 08/18/2015 Effective Date: 08/18/2015



OFFICE OF THE ATTORNEY GENERAL

INDIANA GOVERNMENT CENTER SOUTH, FIFTH FLOOR 302 W. WASHINGTON STREET - INDIANAPOLIS, IN 46204-2770 www.AttorneyGeneral.IN.gov #EGENTE! 2815 AUG 18 AM 9: 12

TELEPHONE: 317-232.6201

FAX: 317.232.7979

GREG ZOELLER
INDIANA ATTORNEY GENERAL

August 13, 2015

CERTIFICATION

I have examined the Articles of Amendment and Restatement of the Articles of Incorporation of Onenation Insurance Company which is changing its name to Fresenius Health Plans Insurance Company, and I certify that they conform to the provisions of the Indiana Insurance Law and are not inconsistent with the State and Federal Constitutions.

Respectfully submitted,

GREGORY ZOELLER

Attorney General of Indiana

Atty No. 1958-98

Gordon E. White, Jk.

Deputy Attorney General

Atty No. 0001041-49

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Certification Number: 2015100785970

Indiana Secretary of State Packet: 2003102300454 Filing Date: 08/18/2015 Effective Date: 08/18/2015

State of Indiana Office of the Secretary of State

CERTIFICATE OF AMENDED AND RESTATED ARTICLES OF INCORPORATION

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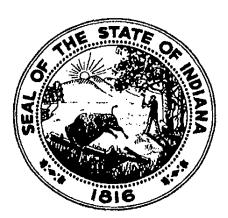
ONENATION INSURANCE COMPANY

I, CONNIE LAWSON, Secretary of State of Indiana, hereby certify that Amended and Restated Articles of the above Domestic Insurance Corporation have been presented to me at my office, accompanied by the fees prescribed by law and that the documentation presented conforms to law as prescribed by the provisions of the Indiana Insurance Law.

The name following said transaction will be:

FRESENIUS HEALTH PLANS INSURANCE COMPANY

NOW, THEREFORE, with this document I certify that said transaction will become effective Tuesday, August 18, 2015.



In Witness Whereof, I have caused to be affixed my signature and the seal of the State of Indiana, at the City of Indianapolis, August 18, 2015.

CONNIE LAWSON,

SECRETARY OF STATE

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