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### **COVER LETTER**

Division of Corporations		
SUBJECT: Manulife Insurance Co	ompany of Corporation)	
`	or Corporation)	
DOCUMENT NUMBER:		
The enclosed Amendment and fee are subm	nitted for filing.	
Please return all correspondence concerning	g this matter to the following:	
Rosalie M. Calabraro		
(Name of Contact Person)		
Manulife Insurance Company		
(Firm/Company)	· <del></del>	
601 Congress Street		
(Address)		
Boston, MA 02210		
(City/State and Zip Code)		
For further information concerning this mat	ter, please call:	
Rosalie M. Calabraro	at (617) 663-2493 (Area Code & Daytime Telephone Number)	
(Name of Contact Person)	(Area Code & Daytime Telephone Number)	
Enclosed is a check for the following amou	nt:	
\$35.00 Filing Fee \$43.75 Filing Fee & Certificate of Statu	\$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	Amenament Section Division of Corporations	
P.O. Box 6327	Clifton Building	
Tallahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301	

John Hancock Financial Services, Inc.

601 Congress Street Boston, Massachusetts 02210 (617) 663-2493

Fax: (617) 663-2494

Email: rcalabraro@jhancock.com

Rosalie M. Calabraro Assistant Corporate Secretary

April 16, 2008

Amendment Section
Division of Corporation
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Re: Amendment of Certificate of Authority regarding name change of

Manulife Insurance Company to John Hancock Life & Health Insurance

Company

Dear Sir/Ms.:

I am requesting a Certificate of Status regarding the above name change. I have completed and attached the following documents:

Cover Letter

Completed Application for amendment

Check in the amount of \$43.75

Copy of the State of Delaware Certificate of Amendment of Certificate of Incorporation

If you need anything further, please do not hesitate to contact me.

n Calabrard

Thank you.

Sincerely,

Rosalle M. Calabraro

### **PROFIT CORPORATION** APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO APPLICATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

# SECTION I

APPLICATION FOR AUTHORIZA	FIT CORPORATION TO FILE AMENDMENT TO ATION TO TRANSACT BUSINESS IN FLORIDA
(Purs	uant to s. 607.1504, F.S.)
(1-3	SECTION I MUST BE COMPLETED)  number of corporation (if known)
(Document	number of corporation (if known)
Manualife Importance Occurrence	
1. Manulife Insurance Company	
(Name of corporation as it	appears on the records of the Department of State)
<sub>2.</sub> Delaware	<sub>3.</sub> November 9, 1981
(Incorporated under laws of)	(Date authorized to do business in Florida)
(4-7 complete	SECTION II ONLY THE APPLICABLE CHANGES)
4. If the amendment changes the name of the corits jurisdiction of incorporation? April 4, 205, John Hancock Life & Health Insura	
(Name of corporation after the amendment, ad appropriate abbreviation, if not contained in	ding suffix "corporation," "company," or "incorporated," or new name of the corporation)  ternate corporate name adopted for the purpose of transacting
6. If the amendment changes the period of duration N/A	on, indicate new period of duration.
IV/A	(New duration)
7. If the amendment changes the jurisdiction of in N/A	(New jurisdiction)
3. Attached is a certificate or document of similar 90 days prior to delivery of the application to the having cystody of corporate records in the juris	r import, evidencing the amendment, authenticated not more than he Department of State, by the Secretary of State or other official sdiction under the laws of which it is incorporated.
(Signature of a director, president or other office of a receiver or other court appointed fiduciary,	er - if in the hands by that fiduciary)
Emanuel Alves	Vice President, Counsel & Corporate Secretary
(Typed or printed name of person signing)	(Title of person signing)

# Delaware

PAGE :

## The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT
COPY OF THE CERTIFICATE OF AMENDMENT OF "MANULIFE INSURANCE
COMPANY", CHANGING ITS NAME FROM "MANULIFE INSURANCE COMPANY" TO
"JOHN HANCOCK LIFE & HEALTH INSURANCE COMPANY", FILED IN THIS
OFFICE ON THE FOURTH DAY OF APRIL, A.D. 2008, AT 8 O'CLOCK A.M.

A FILED COPY OF THIS CERTIFICATE HAS BEEN FORWARDED TO THE NEW CASTLE COUNTY RECORDER OF DEEDS.

0915152 8100

080394222

Warriet Smith Windsor, Secretary of State

AUTHENTICATION: 6500773

DATE: 04-04-08

You may verify this certificate online at corp.delaware.gov/authver.shtml

#### STATE OF DELAWARE CERTIFICATE OF AMENDMENT OF CERTIFICATE OF INCORPORATION

The corporation organized and existing under and by virtue of the General Corporation Law of the State of Delaware does hereby certify:

FIRST: That at a meeting of the Board of Directors of Manulife Insurance Company (the "Company") on April 3, 2008, resolutions were duly adopted setting forth a proposed amendment of the Certificate of Incorporation of said corporation, declaring said amendment to be advisable and calling a meeting of the stockholders of said corporation for consideration thereof. The resolution setting forth the proposed amendment is as follows:

**RESOLVED:** To change the name of the Company to John Hancock Life & Health Insurance Company, and to amend the Company's Certificate of Incorporation and Bylaws accordingly.

**SECOND:** That pursuant to a written consent in lieu of meeting John Hancock Variable Life Insurance Company, the Company's sole stockholder adopted a resolution consenting to the name change. The resolution adopted by the sole stockholder is as follows:

**RESOLVED:** That an amendment to the Company's Certificate of Incorporation be, and it hereby is, approved to change and amend the First Article of said Certificate of Incorporation, so that, as amended, said Article shall be and read as follows:

The name of the Corporation is:

John Hancock Life & Health Insurance Company

**THIRD:** That said amendment was duly adopted in accordance with the provisions of Section 242 of the General Corporation Law of the State of Delaware.

**FOURTH:** That the capital of said corporation shall not be reduced under or by reason of said amendment.

IN WITNESS WHEREOF, said corporation has caused this certificate to be signed this 3<sup>rd</sup> day of April, 2008.

Authorized Officer

Title: Vice President, Counsel and

Corporate Secretary

Name: Emanuel Alves

Print or Type

State of Delaware-Secretary of State Division of Corporations Delivered 08:00 AM 04/04/2008 FTLED 08:00 AM 04/04/2008 SRV 080394222 - 0915152 FILE