

MAR 26 2015
R. WHITE

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Colony National Insurance Company

Name of Corporation

DOCUMENT NUMBER: F00000007042

The enclosed Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Austin King

Name of Contact Person

Argo Group US, Inc.

Firm/Company

PO Box 469012

Address

San Antonio, TX 78246

City/State and Zip Code

aking@argogroupus.com

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

For further information concerning this matter, please call:

Austin King

Name of Contact Person

at (**210**) **321-6704**

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

FILE AMENDMENT
BUSINESS IN FLORIDA
MAY 3 3:04 PM
TALLAHASSEE, FLORIDA

F00000007042

Colony National Insurance Company

2. Virginia

3 12-20-2000

4. If the amendment changes the name of the corporation, when was the change effected under the laws of its jurisdiction of incorporation? **March 4, 2015**

5 Peleus Insurance Company

(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.

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

Craig Stephen Comeaux

(Typed or printed name of person signing)

Secretary

(Title of person signing)

Commonwealth of Virginia

STATE CORPORATION COMMISSION

March 4, 2015

PELEUS INSURANCE COMPANY
8720 STONY POINT PKWY STE 400
RICHMOND VA 23235-1989

is hereby licensed to transact the business of

Auto Liability
Auto Physical Damage
Burglary & Theft
Commercial Multi-Peril
Fire

Glass
Inland Marine
Liability Other than Auto
Misc Property & Casualty

in the Commonwealth of Virginia through the thirtieth day of June next succeeding the date hereof unless this license shall be sooner revoked or otherwise cancelled.

ID: 34118



State Corporation Commission
Bureau of Insurance

By: _____

Jacqueline K. Conlan
Commissioner