

# FD1000004166

CT CORPORATION

CORPORATION(S) NAME

1) Alliance Insurance Group, Inc.

Dropping d/b/a of: Alliance Brokerage, Inc.

2)

FILED  
2002 APR 10 PM 2:52  
TALLAHASSEE FLORIDA

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> Profit              | <input checked="" type="checkbox"/> Amendment   | <input type="checkbox"/> Merger             |
| <input type="checkbox"/> Nonprofit           |   |   |
| <input type="checkbox"/> Foreign             | <input type="checkbox"/> Dissolution/Withdrawal | <input type="checkbox"/> Mark               |
|  | <input type="checkbox"/> Reinstatement          |   |
| <input type="checkbox"/> Limited Partnership | <input type="checkbox"/> Annual Report          | <input type="checkbox"/> Other              |
| <input type="checkbox"/> LLC                 | <input type="checkbox"/> Name Registration      | <input type="checkbox"/> Change of RA       |
|  | <input type="checkbox"/> Fictitious Name        | <input type="checkbox"/> UCC                |
| <input type="checkbox"/> Certified Copy      | <input type="checkbox"/> Photocopies            | <input type="checkbox"/> CUS                |
| <input type="checkbox"/> Call When Ready     | <input type="checkbox"/> Call If Problem        | <input type="checkbox"/> After 4:30         |
| <input checked="" type="checkbox"/> Walk In  | <input type="checkbox"/> Will Wait              | <input checked="" type="checkbox"/> Pick Up |
| <input type="checkbox"/> Mail Out            |   |   |

Name \_\_\_\_\_  
 Availability \_\_\_\_\_  
 Document \_\_\_\_\_  
 Examiner \_\_\_\_\_  
 Updater \_\_\_\_\_  
 Verifier \_\_\_\_\_  
 W.P. Verifier \_\_\_\_\_

4/10/02

FILE FIRST

Order#: 5234476

Ref#: \_\_\_\_\_

C. Coulliette

APR 10 2002

Amount: \$ \_\_\_\_\_

DIVISION OF CORPORATION

02 APR 10 PM 1:29

RECEIVED

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\*\*\*\*\*35.00 \*\*\*\*\*35.00

FILED  
2002 APR 10 PM 2:52  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

CERTIFIED COPY OF RESOLUTION  
CORPORATION TERMINATING A FICTITIOUS NAME FOR USE  
IN THE STATE OF FLORIDA

I, THE UNDERSIGNED DAVID JATHO HEREBY  
CERTIFY THAT THE FOLLOWING IS A TRUE, COMPLETE AND CORRECT COPY OF A CERTAIN  
RESOLUTION OF THE BOARD OF DIRECTORS OF Alliance Insurance Group, Inc., A  
CORPORATION DULY ORGANIZED AND EXISTING UNDER THE LAWS OF THE STATE OF Missouri  
Missouri, WHICH RESOLUTION WAS DULY ADOPTED AT A DULY CALLED MEET-  
ING OF THE SAID BOARD, HELD ON 3/1/02, A  
QUORUM BEING PRESENT, AND IS SET FORTH IN THE MINUTES OF THE SAID MEETING:  
THAT I AM THE KEEPER OF THE CORPORATE SEAL AND OF THE MINUTES AND RECORDS OF  
THIS CORPORATION; AND THAT THE SAID RESOLUTION HAS NOT BEEN RESCINDED OR  
MODIFIED:

“RESOLVED THAT Alliance Insurance Group, Inc.  
ORGANIZED AND EXISTING IN THE STATE OF Missouri  
HEREBY TERMINATES THE NAME Alliance Brokerage, Inc.  
FOR USE IN THE STATE OF FLORIDA FOR ALL PURPOSES; AND RESOLVED  
FURTHER THAT ALL ACTIVITIES AND BUSINESS OF THE CORPORATION  
WITHIN THE STATE OF FLORIDA CARRIED OUT UNDER THE NAME  
Alliance Brokerage, Inc. SHALL CEASE.

IN WITNESS WHEREOF, I HAVE HEREUNTO SUBSCRIBED MY NAME AND AFFIXED  
THE SEAL OF THE SAID CORPORATION, ON THIS THE 31<sup>st</sup> DAY OF March  
2002.

David Jatho