

F03000002184

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(City/State/Zip/Phone #)

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DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

B. KOHR

JUL - 8 2008

EXAMINER



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 636936 7574683

AUTHORIZATION

*[Handwritten signature]*

COST LIMIT : \$ 35.00

ORDER DATE : July 7, 2008

ORDER TIME : 10:09 AM

ORDER NO. : 636936-055

CUSTOMER NO: 7574683

FOREIGN FILINGS

NAME: COMMERCE INSURANCE SERVICES,  
INC.

XX CORPORATE  
       LIMITED PARTNERSHIP  
       LIMITED LIABILITY COMPANY

XXXX AMENDMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

       CERTIFIED COPY  
XX        PLAIN STAMPED COPY  
       CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Carina L. Dunlap -- EXT#

EXAMINER: \_\_\_\_\_

**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)**

F03000002184

\_\_\_\_\_  
(Document number of corporation (if known))

1. Commerce Insurance Services, Inc.

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

2. New Jersey

\_\_\_\_\_  
(Incorporated under laws of)

3. June 12, 2007

\_\_\_\_\_  
(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? June 27, 2008

5. Conner Strong Companies, 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)

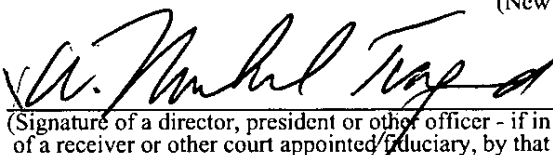
\_\_\_\_\_  
(If new name is unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

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)



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

William Michael Tiagwad

\_\_\_\_\_  
(Typed or printed name of person signing)

President

\_\_\_\_\_  
(Title of person signing)

STATE OF NEW JERSEY  
DEPARTMENT OF TREASURY  
CERTIFICATE OF NAME CHANGE

CONNER STRONG COMPANIES, INC.

*I, the Treasurer of the State of New Jersey,  
do hereby certify, that on June 27, 2008,  
a name change certificate was duly filed in this  
office, changing the business name from:  
**Commerce Insurance Services, Inc.**  
to:  
**Conner Strong Companies, Inc.***

IN TESTIMONY WHEREOF, I have  
hereunto set my hand and  
affixed my Official Seal  
at Trenton, this  
30th day of June, 2008



A handwritten signature in black ink, appearing to read "R. David Rousseau", written over a horizontal line.

R. David Rousseau  
Treasurer