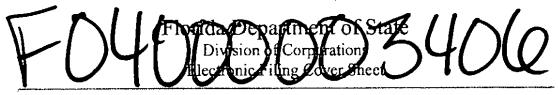
6/4/2021

Division of Corporations



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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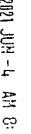
COR AMND/RESTATE/CORRECT OR O/D RESIGN BBVA INSURANCE AGENCY, INC.

Certificate of Status	0
Certified Copy	1
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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)

F04000003406			
(Document nu	imber of corporation (if known)		
BBVA Insurance Agency, Inc.			
(Name of corporation as it up	pears on the records of the Department of Sint	e)	
Texas	3. 06/16/2004		
(Incorporated under laws of)	(Date authorized to do b	usiness in Florida)	
(4-7 COMPLETE ON	SECTION II (LY THE APPLICABLE CHANGES)		
4. If the amendment changes the name of the corporation, who	en was the change effected under the laws of i	ts jurisdiction of	
06/01/2021			
5. PNC Insurance Agency, Inc. (Name of corporation after the amendment, adding suffix and contained in new name of the corporation)	corporation," "company," or "incorporated," (or appropriate abbreviatio	on, if
(If new name is unavailable in Florida, enter alternate corp.	orate name adopted for the purpose of traitsact	ing business in Florida)	
6. If the amendment changes the period of duration, indi-	cate new period of duration.		
	(New duration)	FALLA	2021 JUN -4
7. If the amendment changes the jurisdiction of incorpora	ation, indicate new jurisdiction.	ASSI ASSI	1-1
	(New jurisdiction)	m_ m_	<u> </u>
 If amending the registered agent and/or registered office are registered agent and/or the new registered office are 		- 3F	80.08
Name of New Registered Agent			
(Flor	rida street address)		
New Registered Office Address:	, Florida_		
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing Registe	red Agent:		
I hereby accept the appointment as registered agent. I an	familiar with and accept the obligations of th	he position.	
Signature of New Registered Agent, if ch	anging		

9.	I'the amendment changes persor	, title or capacity	in accordance with	h 607.1504 (4),	indicate that change
----	--------------------------------	---------------------	--------------------	-----------------	----------------------

Title/ Capacity	<u>Name</u>	Address	Type of Action
			□Add
			□Remove
			CRemove
			□Remove
			☐Remove
			□Remove
10. Attached is a of the applicat under the layer	certificate or document of similar import, evi- ion to the Department of State, by the Secretar s of which it is incorporated.	dencing the amendment, authenticated no y of State or other official having custody o	t more than 90 days prior to delivery of corporate records in the jurisdiction
	(Signature of a director a receiver or other cou	r, president or other officer - if in the hand irt appointed fiduciary, by that fiduciary)	s of
Brian Herric		Vice President	
	(Typed or printed name of person signing)	(Title of per	son signing)

FILING FEE \$35.00

2021 JUN -4 AM 8: 08

Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



Jose A. Esparza Deputy Secretary of State

Office of the Secretary of State

Certificate of Fact

The undersigned, as Deputy Secretary of State of Texas, does hereby certify that on May 24, 2021, BBVA Insurance Agency, Inc., a Domestic For-Profit Corporation (file number 32185400), changed its name to PNC Insurance Agency, Inc.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Scal of State at my office in Austin, Texas on June 02, 2021.



Jose A. Esparza Deputy Secretary of State

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