

F05000002931

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

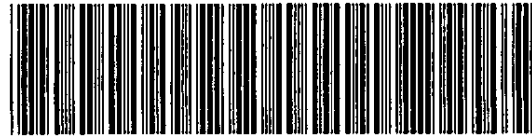
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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03/27/17--01024--001 \*\*35.00

FILED  
2017 MAR 27 AM 9:58  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Name Chg

MAR 29 2017

I ALBRITTON

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Fairmont Specialty Insurance Agency, Inc.  
Name of Corporation

**DOCUMENT NUMBER:** \_\_\_\_\_

The enclosed Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Donna T. Nolan

\_\_\_\_\_  
Name of Contact Person

Fairmont Specialty Insurance Agency, Inc.

\_\_\_\_\_  
Firm/Company

1208 Massillon Road, Suite G 200

\_\_\_\_\_  
Address

Akron, OH 44306

\_\_\_\_\_  
City/State and Zip Code

Donna.N@hartvillegroup.com

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

For further information concerning this matter, please call:

Donna Nolan

\_\_\_\_\_  
Name of Contact Person

at ( 234 ) 231-1786

\_\_\_\_\_  
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

**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)**

**F05000002931**

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

**FILED**  
**2017 MAR 21 AM 9:53**  
**SECRETARY OF STATE**  
**TALLAHASSEE, FLORIDA**

1. Fairmont Specialty Insurance Agency, Inc.

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

2. Ohio

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

3. 05/17/2005

\_\_\_\_\_  
(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? 3/3/2017

5. C&F Insurance Agency, 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)

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.

Patricia Adams

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

Patricia Adams

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

Assistant Secretary

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



DATE	DOCUMENT ID	DESCRIPTION	FILING	EXPED	PENALTY	CERT	COPY
03/07/2017	201706505182	AMENDMENT TO ARTICLES (AMD)	50.00	0.00	0.00	0.00	0.00

**Receipt**

This is not a bill. Please do not remit payment.

FAIRMONT SPECIALTY INSURANCE AGENCY  
DONNA T. NOLAN  
1208 MASSILLON RD., STE. G200  
AKRON, OH 44306

# STATE OF OHIO CERTIFICATE

Ohio Secretary of State, Jon Husted  
1147049

It is hereby certified that the Secretary of State of Ohio has custody of the business records for  
**C&F INSURANCE AGENCY, INC.**

and, that said business records show the filing and recording of:

Document(s)

**AMENDMENT TO ARTICLES**

Effective Date: 03/03/2017

Document No(s):

**201706505182**



United States of America  
State of Ohio  
Office of the Secretary of State

Witness my hand and the seal of the  
Secretary of State at Columbus, Ohio this  
7th day of March, A.D. 2017.

Ohio Secretary of State



Form 540 Prescribed by:

**JON HUSTED**  
**OHIO SECRETARY OF STATE**

Toll Free: (877) 808-FILE (877-767-3453)

Central Ohio: (614) 465-3910

[www.OhioSecretaryofState.gov](http://www.OhioSecretaryofState.gov)

[busserv@OhioSecretaryofState.gov](mailto:busserv@OhioSecretaryofState.gov)

File online or for more information: [www.OhBusinessCentral.com](http://www.OhBusinessCentral.com)

Mail this form to one of the following:

Regular Filing (non expedite)

P.O. Box 1329

Columbus, OH 43216

Expedite Filing (Two business day processing time.  
Requires an additional \$100.00)

P.O. Box 1360

Columbus, OH 43216

2007 MAR -3 AM 11:29

**Certificate of Amendment**  
**(For-Profit, Domestic Corporation)**  
**Filing Fee: \$50**  
**Form Must Be Typed**

**Check appropriate box:**

- ☒ Amendment to existing Articles of Incorporation (125-AMDS)
- ☐ Amended and Restated Articles (122-AMAP) - The following articles supersede the existing articles and all amendments thereto.

**Complete the following information:**

Name of Corporation

Charter Number

**Check one box below and provide information as required:**

- ☐ The articles are hereby amended by the **Incorporators**. Pursuant to Ohio Revised Code section 1701.70(A), incorporators may adopt an amendment to the articles by a writing signed by them if initial directors are not named in the articles or elected and before subscriptions to shares have been received.

- ☐ The articles are hereby amended by the **Directors**. Pursuant to Ohio Revised Code section 1701.70 (A), directors may adopt amendments if initial directors were named in articles or elected, but subscriptions to shares have not been received. Also, Ohio Revised Code section 1701.70(B) sets forth additional cases in which directors may adopt an amendment to the articles.

The resolution was adopted pursuant to Ohio Revised Code section 1701.70(B)  
(In this space insert the number 1 through 10 to provide basis for adoption.)

- ☒ The articles are hereby amended by the **Shareholders** pursuant to Ohio Revised Code section 1701.71.

- ☐ The articles are hereby amended and restated pursuant to Ohio Revised Code section 1701.72.

**A copy of the resolution of amendment is attached to this document.**

**Note:** If amended articles were adopted, they must set forth all provisions required in original articles except that articles amended by directors or shareholders need not contain any statement with respect to initial stated capital. See Ohio Revised Code section 1701.04 for required provisions.

**Required**

Must be signed by all incorporators, if amended by incorporators, or an authorized officer if amended by directors or shareholders, pursuant to Ohio Revised Code section 1701.73(B) and (C).

If authorized representative is an individual, then they must sign in the "signature" box and print their name in the "Print Name" box.

Signature

By (if applicable)

If authorized representative is a business entity, not an individual, then please print the business name in the "signature" box, an authorized representative of the business entity must sign in the "By" box and print their name in the "Print Name" box.

Patricia Adams

Print Name

*Patricia Adams*

Signature

By (if applicable)

*PATRICIA ADAMS*

Print Name

**FAIRMONT SPECIALTY INSURANCE AGENCY**

I, JAMES V. KRAUS, Secretary of Fairmont Specialty Insurance Agency, an Ohio corporation (the "Company"), do hereby certify that the following is a true and correct copy of resolutions adopted by Unanimous Written Consent in Lieu of Meeting of the Board of Directors of the Company dated as of February 10, 2017, and I do further certify that said resolutions have not been amended or rescinded:

**RESOLVED**, that the FIRST Article of the Company's Articles of Incorporation be amended to read in its entirety as follows:

The name of the corporation is C&F Insurance Agency, Inc.

and it is further

**RESOLVED**, that the above amendment to the Company's Articles of Incorporation be submitted to the Stockholder of the Company for approval; and it is further

**RESOLVED**, that upon approval of the above amendment by the Company's Stockholder, the officers of the Company are authorized to undertake all actions necessary or appropriate to effect the purposes and intent of the foregoing resolutions, including without limitation, the filing of the Articles of Amendment with the Ohio Secretary of State and any other regulatory authorities.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the seal of the Company this 21<sup>st</sup> day of February, 2017.

  
James V. Kraus

(SEAL)

**FAIRMONT SPECIALTY INSURANCE AGENCY**

I, JAMES V. KRAUS, Secretary of Fairmont Specialty Insurance Agency, an Ohio corporation (the "Corporation"), do hereby certify that the following is a true and correct copy of resolutions adopted by Written Consent in Lieu of Meeting of the Stockholder of the Corporation dated as of February 10, 2017, and I do further certify that said resolutions have not been amended or rescinded:

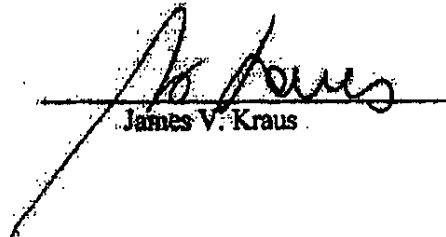
**WHEREAS**, the Corporation's Board of Directors has proposed that the Corporation change its name to C&F Insurance Agency, Inc. and amend its Articles of Incorporation accordingly.

**NOW, THEREFORE, BE IT RESOLVED**, that the FIRST Article of the Corporation's Articles of Incorporation be amended to read in its entirety as follows:

The name of the Corporation is C&F Insurance Agency, Inc.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the seal of the Corporation this 21<sup>st</sup> day of February, 2017.



  
James V. Kraus



UNITED STATES OF AMERICA,  
STATE OF OHIO,  
OFFICE OF SECRETARY OF STATE

*I, Jon Husted, Secretary of State of the State of Ohio, do hereby certify that the paper to which this is attached is a true and correct copy from the original record now in my official custody as Secretary of State.*



*Witness my hand and the seal of the  
Secretary of State at Columbus, Ohio this  
13th day of March, A.D. 2017.*

Ohio Secretary of State

*Jon Husted*

Validation Number:  
201707202424