

F06000005775

Florida Department of State
Division of Corporations
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H190001904163ABC

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To:

Division of Corporations
Fax Number : (850)617-6380

From:

Account Name : TRIAD PROFESSIONAL SERVICES
Account Number : I201600000008
Phone : (850)777-2091
Fax Number : (770)220-1943

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

**COR AMND/RESTATE/CORRECT OR O/D RESIGN
TAYLOR WOODROW INSURANCE SERVICES, INC.**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$43.75

RECEIVED

2019 JUN 18 PM 1:50

TAYLOR WOODROW INSURANCE SERVICES, INC.

2019 JUN 18 AM 11:22

FILED

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: TAYLOR WOODROW INSURANCE SERVICES, INC.
Name of Corporation

DOCUMENT NUMBER: F06000005775

The enclosed Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Sharon K. Gray

Name of Contact Person

Triad Professional Services

Firm/Company

1720 Windward Concourse, Ste. 390

Address

Alpharetta, GA 30005

City/State and Zip Code

jbadon@triadpros.com

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

For further information concerning this matter, please call:

Sharon K. Gray

Name of Contact Person

770

777-2091

at ()

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

((H19000190416 3)))

FILED
JUN 18 AM 11:22
TALLAHASSEE, FLORIDA

PROFIT CORPORATION
APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO
APPLICATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA
(Pursuant to s. 607.1304, F.S.)

SECTION I
(1-3 MUST BE COMPLETED)

F06000005775

(Document number of corporation (if known))

1. Taylor Woodrow Insurance Services, Inc.

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

2. Delaware

(Incorporated under laws of)

3. 09/06/2006

(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 18, 2019

5. Taylor Morrison Insurance Services, 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.

Caroline G. Estrada
(Signature of a director, president or other officer - If in the hands of a receiver or other court appointed fiduciary, by that fiduciary)

Caroline G. Estrada

(Typed or printed name of person signing)

Assistant Secretary

(Title of person signing)

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY THAT THE SAID "TAYLOR WOODROW
INSURANCE SERVICES, INC.", FILED A CERTIFICATE OF AMENDMENT,
CHANGING ITS NAME TO "TAYLOR MORRISON INSURANCE SERVICES, INC."
ON THE EIGHTEENTH DAY OF JUNE, A.D. 2019, AT 10:13 O'CLOCK A.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "TAYLOR
MORRISON INSURANCE SERVICES, INC." WAS INCORPORATED ON THE THIRD
DAY OF AUGUST, A.D. 2006.



4200250 8320
SR# 20195496689

You may verify this certificate online at corp.delaware.gov/authver.shtml

A handwritten signature in black ink, appearing to read "JBULLOCK", written over a horizontal line. Below the line, the text "JEFFREY W. BULLOCK, Secretary of State" is printed in small letters.

Authentication: 203045324
Date: 06-18-19

((H19000190416 3)))