

F06000005789

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

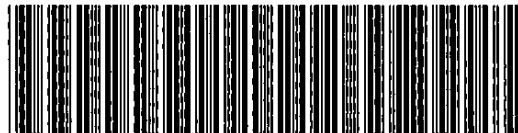
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*name  
change  
amended*

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06 SEP 12 AM 11:55  
FILED  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

RECEIVED  
06 SEP 12 AM 11:55

FILED  
2006 SEP 12 PM 12:46  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

*1000  
9/14/06*

*\* 00789, 00524, 00672*



CT

a Wolters Kluwer business

CT

1203 Governor's Square Blvd.  
Tallahassee, FL 32301-2960

850 222 1092 tel

850 222 7615 fax

www.ctlegalsolutions.com

September 12, 2006

Department of State, Florida  
Clifton Building  
2611 Executive Center Circle  
Tallahassee FL 32301

Re: Order #: 6705484 SO  
Customer Reference 1: .....  
Customer Reference 2:

Dear Department of State, Florida:

Please file the attached:

Progressive Consumers Insurance Company (FL)  
Evidence of Amendment  
Florida

(2)

Progressive Consumers Insurance Company (FL)  
Obtain Document - Misc - Certified copy of filing  
Florida

Enclosed please find a check for the requisite fees. Please return evidence of filing(s) to the attention of the undersigned.

If for any reason the enclosed cannot be filed upon receipt, please contact the undersigned immediately at (850) 222-1092. Thank you very much for your help.

CT Corporation

September 12, 2006

Department of State, Florida  
Clifton Building  
2611 Executive Center Circle  
Tallahassee FL 32301

RECEIVED  
06 SEP 14 AM 11:30  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

Re: Order #: 6705484 SO  
Customer Reference 1: .....  
Customer Reference 2:

Dear Department of State, Florida:

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Progressive Consumers Insurance Company (FL)  
Evidence of Amendment  
Florida

② Progressive Consumers Insurance Company (FL)  
Obtain Document - Misc - Certified copy of filing  
Florida

Enclosed please find a check for the requisite fees. Please return evidence of filing(s) to the attention of the undersigned.

If for any reason the enclosed cannot be filed upon receipt, please contact the undersigned immediately at (850) 222-1092. Thank you very much for your help.

Attn: Annette Ramsey

please refile and backdate to 9/12  
Thank! Annette

**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)**

F06000005789

(Document number of corporation (if known))

1. Progressive Consumers Insurance Company  
(Name of corporation as it appears on the records of the Department of State)
2. Wisconsin 3. August 30, 2006  
(Incorporated under laws of) (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 15, 2006

5. Artisan and Truckers Casualty Company  
(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)

Margaret A. Rose  
(Signature of a director, president or other officer - if in the hands of a receiver or other court-appointed fiduciary, by that fiduciary)

Margaret A. Rose  
(Typed or printed name of person signing)

Asst. Secretary  
(Title of person signing)

SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
2006 SEP 12 PM 12:46



**State of Wisconsin  
Office of the Commissioner of Insurance  
P.O. Box 7873  
Madison, Wisconsin 53707-7873**

**Certification of the Authenticity of Copy of Document on File**

**The Commissioner of Insurance of the State of Wisconsin certifies that the attached copy of**

**ARTICLES OF AMENDMENT**

**for Artisans and Truckers Casualty Company (formerly Progressive Consumers Insurance Company) Name change effective June 15, 2006**

**is a true and correct copy of the original now on file with the Office of the Commissioner of Insurance.**

**Dated at Madison, Wisconsin, this 20th day of June, 2006.**

A handwritten signature in black ink, appearing to read "Janet Dwyer".

**Commissioner of Insurance**

**ARTICLES OF AMENDMENT  
OF  
PROGRESSIVE CONSUMERS INSURANCE COMPANY  
(NEW NAME: ARTISAN AND TRUCKERS CASUALTY COMPANY)**

The undersigned Vice President and Secretary of Progressive Consumers Insurance Company hereby certify pursuant to §180.1006 of the Wisconsin Business Corporation Act (the "Act") the following:

1. The name of the corporation is Progressive Consumers Insurance Company.
2. The Amended and Restated Articles of Incorporation of Progressive Consumers Insurance Company have been amended by deleting Article **FIRST** in its entirety and substituting therefor the following:  
  
"FIRST: The name of the corporation is Artisans and Truckers Casualty Company."
3. The amendment does not provide for an exchange, reclassification or cancellation of issued shares.
4. The amendment was adopted on June 9, 2006, however, the amendment is effective on the date approved by the Wisconsin Commissioner of Insurance.
5. The amendment was adopted in accordance with §180.1003.

**IN WITNESS WHEREOF**, the undersigned corporation, by its duly elected Vice President and Secretary, has hereunto set its name this 12th day of June, 2006.

**SEAL**

**PROGRESSIVE CONSUMERS INSURANCE COMPANY**

By: Sandra L. Rihvalsky  
Sandra L. Rihvalsky, Vice President

And By: Lynn N. Major  
Lynn N. Major, Secretary

STATE OF OHIO                    )  
  ) SS:  
COUNTY OF CUYAHOGA        )

Before me, a Notary Public, in and for said County and State, personally appeared the above named Sandra L. Rihvalsky, Vice President and Lynn N. Major, Secretary of Progressive Consumers Insurance Company who acknowledged that they sign the foregoing instrument and that the same was their free act and deed individually and as such officers, and the free act and deed of said Corporation.

**IN WITNESS WHEREOF**, I have hereunto signed my name this 12th day of June, 2006.

  
\_\_\_\_\_  
Notary Public

SEAL