

F07000000 941

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP, ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

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FILED
13 MAR 12 PM 12:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MC
5-21-13



Susan P. Wedemeyer
Paralegal
317.237.3476 (t)
317.237.3900 (f)
swedemeyer@fbtlaw.com

May 13, 2013

Ms. Sylvia Gilbert
Regulatory Specialist II
Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

RE: Tobias Insurance Group, Inc. n/k/a Tobias Financial Services, Inc.

Dear Sylvia:

Pursuant to our telephone conversation back in April, we are re-submitting our amending documents to file an Amendment to Application for Authorization to Transact Business in Florida for each of the name changes. Certified copies of the amendments have been enclosed along with the \$35 filing fee for the additional Application. Please return the file-marked Applications to me in the self-addressed stamped envelope enclosed.

Thank you. Please do not hesitate to contact me if you have any questions or need additional information.

Sincerely yours,

FROST BROWN TODD LLC

A handwritten signature in black ink, appearing to read "Susan P. Wedemeyer", written over the printed name.

Susan P. Wedemeyer

/spw
Enclosures

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Kimera J. Hall
Member
317.237.3892 (t)
317.237.3900 (f)
kjhall@fbtlaw.com

March 12, 2013

Florida Department of State
Amendment Section
Division of Corporations
2661 Executive Center Circle
Tallahassee, FL 32301

RE: Tobias Insurance Group, Inc. n/k/a Tobias Financial Services, Inc.

Dear Sir or Madam:

An original and one (1) copy of our document amending the name of the foreign corporation is enclosed for filing with your office along with our check in the amount of \$35 representing the filing fee. Please return all file-stamped copies to me in the envelope provided once the name change is of record.

If you have any questions or if additional information is needed, please do not hesitate to contact me or my paralegal, Sue Wedemeyer. Her telephone number is 317-237-3476 or you may contact her by e-mail at swedemeyer@fbtlaw.com.

Thank you.

Sincerely yours,

FROST BROWN TODD LLC

A handwritten signature in cursive script that reads "Kimera J. Hall".

Kimera J. Hall

KJH/spw

Enclosures

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: TOBIAS INSURANCE GROUP, INC.
Name of Corporation

DOCUMENT NUMBER: F07000000941

The enclosed Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

SUSAN P. WEDEMEYER

Name of Contact Person

FROST BROWN TODD LLC

Firm/Company

201 NORTH ILLINOIS STREET, SUITE 1900

Address

INDIANAPOLIS, IN 46204

City/State and Zip Code

nrutigli@tobias.com

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

For further information concerning this matter, please call:

SUSAN P. WEDEMEYER

Name of Contact Person

at (317)

237-3476

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)

F07000000941

(Document number of corporation (if known))

1. TOBIAS INSURANCE GROUP, INC. n/k/a TIG CAPITAL PARTNERS, INC.
(Name of corporation as it appears on the records of the Department of State)

2. INDIANA
(Incorporated under laws of)

3. 02/19/2007
(Date authorized to do business in Florida)

FILED
13 MAR 12 PM 12:15
SECRETARY OF STATE
TALLAHASSEE, 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? 02/11/2013

5. TOBIAS FINANCIAL 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)

N/A

(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.

N/A

(New duration)

7. If the amendment changes the jurisdiction of incorporation, indicate new jurisdiction.

N/A

(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.

Nick J. Rutigliano
(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)

Nick J. Rutigliano

(Typed or printed name of person signing)

President

(Title of person signing)

The Indiana Secretary of State filing office certifies that this copy is on file in this office.

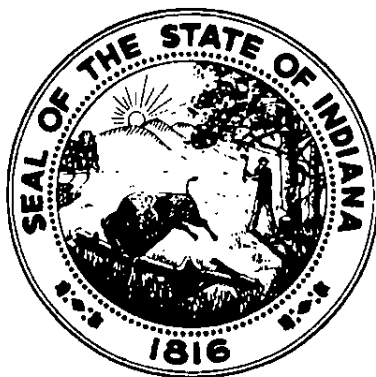
State of Indiana
Office of the Secretary of State
CERTIFICATE OF AMENDMENT
of
TIG CAPITAL PARTNERS, INC.

I, Connie Lawson, Secretary of State of Indiana, hereby certify that Articles of Amendment of the above For-Profit Domestic Corporation has been presented to me at my office, accompanied by the fees prescribed by law and that the documentation presented conforms to law as prescribed by the provisions of the Indiana Business Corporation Law.

The name following said transaction will be:

TOBIAS FINANCIAL SERVICES, INC.

NOW, THEREFORE, with this document I certify that said transaction will become effective Monday, February 11, 2013.



In Witness Whereof, I have caused to be affixed my signature and the seal of the State of Indiana, at the City of Indianapolis, February 11, 2013

Connie Lawson

CONNIE LAWSON,
SECRETARY OF STATE

197307-293 / 2013021101540

**INDIANA SECRETARY OF STATE
BUSINESS SERVICES DIVISION
CORPORATIONS CERTIFIED COPIES**

INDIANA SECRETARY OF STATE
BUSINESS SERVICES DIVISION
302 West Washington Street, Room E018
Indianapolis, IN 46204

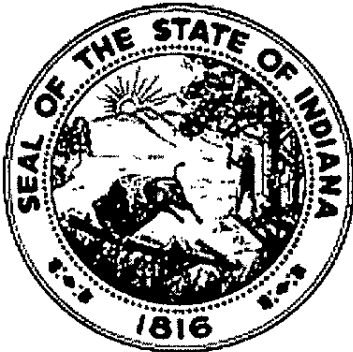
<http://www.sos.in.gov>

March 07, 2013

Company Requested: TOBIAS FINANCIAL SERVICES, INC.

Control Number: 197307-293

Date	Transaction	# Pages
01/25/2013	Articles of Amendment	3
02/11/2013	Articles of Amendment	3



State of Indiana
Office of the Secretary of State

I hereby certify that this is a true and
complete copy of this 6 page
document filed in this office.

Dated: March 07, 2013
Certification Number: 2013030790808

Connie Lawson

Connie Lawson
Secretary of State