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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

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

From:

Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850) 222-1092
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA
10 SEP 17 AM 10:40

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10 SEP 17 AM 8:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**COR AMND/RESTATE/CORRECT OR O/D RESIGN
VERLAN FIRE INSURANCE COMPANY**

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$35.00

*Amend
chgs
jurisdiction
@ 9/17/10*

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)

F08000004867

(Document number of corporation (if known))

1. Verlan Fire Insurance Company
(Name of corporation as it appears on the records of the Department of State)
2. Maryland 3. 11/12/2008
(Incorporated under laws of) (Date authorized to do business in Florida)

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TALLAHASSEE, FLORIDA
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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? Not applicable
5. Not applicable
(Name of corporation after the amendment, adding suffix "corporation," "company," or "incorporated," or appropriate abbreviation, if not contained in new name of the corporation)
- Not applicable
(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.
- Not applicable
(New duration)
7. If the amendment changes the jurisdiction of incorporation, indicate new jurisdiction.
- New Hampshire
(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.


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

J. Kendall Huber

(Typed or printed name of person signing)

Sr. Vice President, General Counsel & Asst. Sec'y

(Title of person signing)

STATE OF MARYLAND
Department of Assessments and Taxation

I, PAUL B. ANDERSON OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF THE STATE OF MARYLAND, DO HEREBY CERTIFY THAT THE DEPARTMENT, BY LAWS OF THE STATE, IS THE CUSTODIAN OF THE RECORDS OF THIS STATE RELATING TO THE FORFEITURE OR SUSPENSION OF CORPORATIONS, OR THE RIGHTS OF CORPORATIONS TO TRANSACT BUSINESS IN THIS STATE, AND THAT I AM THE PROPER OFFICER TO EXECUTE THIS CERTIFICATE.

ACCORDING TO THE RECORDS OF THIS DEPARTMENT NOTICE AND DOCUMENTATION OF THE REDOMESTICATION OF VERLAN FIRE INSURANCE COMPANY FROM MARYLAND TO NEW HAMPSHIRE WAS RECEIVED AND APPROVED FOR RECORD BY THIS DEPARTMENT ON DECEMBER 7, 2009.

IN WITNESS WHEREOF, I HAVE HEREBY SUBSCRIBED MY SIGNATURE AND AFFIXED THE SEAL OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF MARYLAND AT BALTIMORE ON THIS SEPTEMBER 14, 2010.

Paul B. Anderson

Paul B. Anderson
Charter Division



301 West Preston Street, Baltimore, Maryland 21201
Telephone Balto. Metro (410) 767-1344 / Outside Balto. Metro (888) 246-5941 0006612156
MRS (Maryland Relay Service) (800) 735-2258 TT/Voice
Fax (410) 333-7097

CRTGST

Applicant Name: Verlan Fire Insurance Company

NAIC No.: 10815
FEIN: 52-0903682

Uniform Certificate of Authority Application (UCAA)
CERTIFICATE OF COMPLIANCE

State of New Hampshire Office of Commissioner
(Domiciliary state of applicant) (Commissioner, Superintendent, Officer)

I, Roger A. Sevigny, hereby certify that I am the*
(name)
Commissioner of the State of New Hampshire
(position)

and have supervision of insurance business in said State and as such I hereby certify that

VERLAN FIRE INSURANCE COMPANY
(name of Insurer)

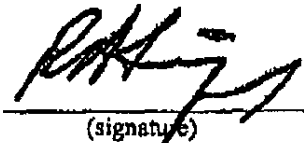
of Bedford, New Hampshire is duly organized under the laws of said State and is authorized
(state)

to transact the business of Property & Casualty
(lines of insurance)**

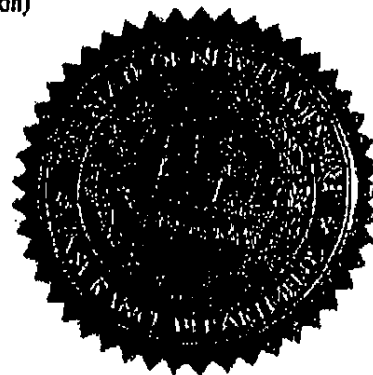
Paragraphs I, II, VI of RSA 401:1 in this State

IN TESTIMONY WHEREOF, I have hereunto set my hand at Concord, New Hampshire
(location)

on this 5th day of May A.D. 2009.
(month)


(signature)

Roger A. Sevigny, Commissioner
(printed name)



*Insurance Commissioner, Officer or Superintendent of Insurance authorized to certify to the insurance business within the domiciliary state.

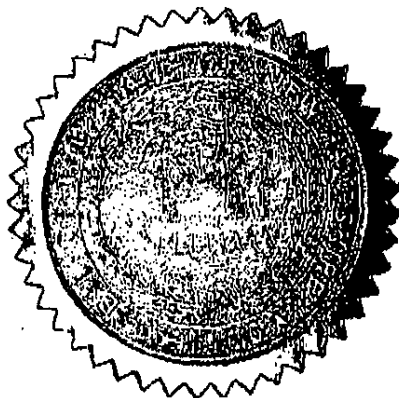
**Lines of Insurance as shown on Form 3 of UCAA

State of New Hampshire
Department of State

CERTIFICATE

I, William M. Gardner, Secretary of State of the State of New Hampshire, do hereby certify Verlan Fire Insurance Company is a New Hampshire corporation registered on December 4, 2008. I further certify that articles of dissolution have not been filed with this office.

INFORMATION REGARDING ANNUAL REPORTS AND/OR FEES MUST BE
OBTAINED FROM THE NEW HAMPSHIRE INSURANCE DEPARTMENT.



In TESTIMONY WHEREOF, I hereto
set my hand and cause to be affixed
the Seal of the State of New Hampshire,
this 16th day of September, A.D. 2010

A handwritten signature in dark ink, appearing to read "Wm. Gardner", written in a cursive style.

William M. Gardner
Secretary of State