

F110000004380

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

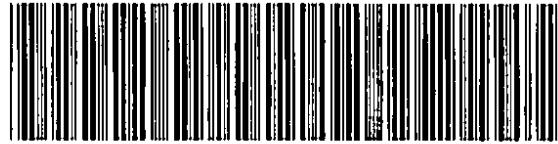
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



700301045937

07/12/17--01017--006 \*\*52.50

JUL 17 2017  
S. YOUNG

FILED  
JUL 12 11 24 AM  
FBI - MEMPHIS

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Wellington Insurance Company  
Name of Corporation

**DOCUMENT NUMBER:** F11000004380

The enclosed Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Rachel Galvan

Name of Contact Person

Wellington

Firm/Company

6801 Calmont Avenue

Address

Fort Worth, TX 76107

City/State and Zip Code

rgalvan@wellingtoninsgroup.com

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

For further information concerning this matter, please call:

Rachel Galvan at ( 817 ) 697- 3460  
Name of Contact Person 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)**

F11000004380

(Document number of corporation (if known))

1. Wellington Insurance Company

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

2. Texas

(Incorporated under laws of)

3. 11/02/2011

(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? May 9, 2017

5. Aventus Insurance 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)

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.

Carolyn B. Hyman

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

Carolyn B. Hyman

(Typed or printed name of person signing)

Secretary

(Title of person signing)



## TEXAS DEPARTMENT OF INSURANCE

Financial Regulation Division - Company Licensing and Registration (103-CL)  
333 Guadalupe, Austin, Texas 78701 ★ PO Box 149104, Austin, Texas 78714-9104  
(512) 676-6400 | F: (512) 490-1035 | (866) 554-4926 | TDI.texas.gov | @TexasTDI

Reference ID: 1016990

Sent via email: rgalvan@wellingtoninsgroup.com

### Official Action of the Texas Department of Insurance

Re: WELLINGTON INSURANCE COMPANY  
Fort Worth, Texas  
TDI License No. 95766

#### Name Change and Amended Certificate of Authority

Date: May 9, 2017

Texas Department of Insurance staff have reviewed the application of Wellington Insurance Company ("company") for approval of amendments to its articles of incorporation and for an amended certificate of authority, changing its name to Aventus Insurance Company.

Since the amendments to its articles of incorporation involve only a name change, a hearing is not required by law. The company has submitted the necessary documents to the department to support the requested name change as required by Tex. Ins. Code §2551. Further, the name Aventus Insurance Company is not so similar to that of any other insurance company as to be likely to mislead the public. Department staff have reviewed these documents and recommend approval of the application.

Based upon the evidence submitted, the company's application for an amendment to its articles of incorporation is approved. Further, an amended certificate of authority should be issued to Aventus Insurance Company, Fort Worth, Texas .

Commissioner of Insurance

Jeff Hunt, Director  
Company Licensing and Registration Office  
Licensing Services Section  
Financial Regulation Division  
Commissioner's Order No. 3632

Recommended by:

Yevgeniya Ryzhova, Insurance Specialist  
Company Licensing and Registration Office  
Licensing Services Section  
Financial Regulation Division

# Texas Department of Insurance

## Amended Certificate of Authority

License no. 95766

Licensed since: February 4, 2003

### Department Certification

**Aventus Insurance Company**  
(domestic stock fire and casualty company)  
organized under the laws of the state of Texas

This entity has complied with the laws of the state of Texas, as applicable, and is authorized to transact the following lines of insurance:

**Accident, Allied Coverages, Auto Physical Damage, Automobile Liability, Burglary & Theft, Fidelity & Surety, Fire, Glass, Health, Inland Marine, Liability Other than Auto, Workers Comp and Emp Liability**

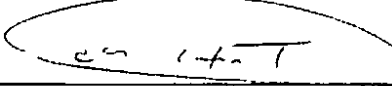
This amended certificate of authority is in full force and effect until it is revoked, canceled, or suspended according to law.

Given under my hand and official seal of office  
in the city of Austin,

May 9, 2017

TEXAS  
COMMISSIONER OF INSURANCE

BY

  
Jeff Hunt, Director  
Company Licensing and Registration  
Commissioner's order no. 3632

