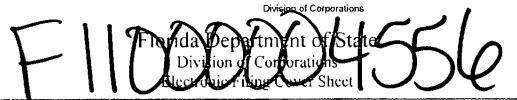
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COR AMND/RESTATE/CORRECT OR O/D RESIGN CATLIN INDEMNITY COMPANY

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1/1

PROFIT CORPORATION APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO APPLICATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

(Pursu	ant to s. 607.1504, F.S.)	20
	SECTION I	2021 SEP 2
(1-3 MU	IST BE COMPLETED)	
F11000004556	,	% №
	The section (IF)	167 T
	mber of corporation (if known)	
Catlin Indennity Company		<u> ခြင့်</u> ကိ
•	ears on the records of the Department of S	State) Şi S
DE	3. 11/14/2011	-
(Incorporated under laws or)	(Date authorized to de	o business in Florida)
41.7 COMPLETE ON	SECTION II	
(+/ COMPLETE ON	LY THE APPLICABLE CHANGES)	
4. If the amendment changes the name of the corporation, whe	n was the change effected under the laws o	of its jurisdiction of
incorporation? 12/11/2020		
Root Property & Casualty Insurance Company		
(Name of corporation after the amendment, adding suffix "one contained in new name of the corporation)	corporation," "company," or "incorporated	l," or appropriate abbreviation, it
not contained in new name of the corporation)		
(If new name is unavailable in Florida, enter alternate corpor		and an inches
(if new name is unavailable in Piorida, effer afternate corpor	ate name adopted for the purpose of trans	acting ousiness in Piorida)
6. If the amendment changes the period of duration, indic-	ate new period of duration.	
	(New duration)	
7. If the amendment changes the jurisdiction of incorpora	tion, indicate new jurisdiction.	
	New jurisdiction)	_
8. If amending the registered agent and/or registered office	e address in Florida, enter the name of t	the
new registered agent and/or the new registered office ad		<u></u>
Name of New Registered Agent		
mune of New Registered Agent		
(LTown	ida street address)	
(Flori	an street address)	
New Registered Office Address:	, Floric	da <i>(Zip Code)</i>
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Register	red Agent:	
Thereby accept the appointment as registered agent. Tam	familiar with and accept the obligations o	of the position.
Signoture of New Registered Agent, if cha	onging	

Fitle/ Capacity	<u>Name</u>	<u>Address</u>	Type of Action
			Add
			1 Remove
_			Adi
			L.Remove
			Add
			L.Remove
			Add
			L.Remove
			Add
			Remove
Attached is a certifical the application to under the laws of w	cate or document of similar import, the Department of State, by the Seci tuch it is incorporated.		ated not more than 90 days prior to deli istody of corporate records in the jurisdic
	/s/ Anne	Doerbecker	
-	(Signature of a dir	ector, president or other officer - if in the court appointed fiduciary, by that fidu	he hands of
	a receiver or other	r cault annaillea traiciary, ny thar trair	iciarvi

FILING FEE \$35.00

Delaware The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

COMPANY', FILED A CERTIFICATE OF AMENDMENT, CHANGING ITS NAME TO

DELAWARE, DO HEREBY CERTIFY THAT THE SAID 'CATLIN INDEMNITY

ROOT PROPERTY & CASUALTY INSURANCE COMPANY ON THE ELEVENTH DAY

OF DECEMBER, A.D. 2020, AT 3:56 O'CLOCK P.M.



Authentication: 204203699

Date: 09-20-21