

1/30/2020

Division of Corporations

F19000004507

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H20000034572 3)))



H200000345723ABCX

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

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

From:

Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (614)280-3338
Fax Number : (954)208-0845

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

**COR AMND/RESTATE/CORRECT OR O/D RESIGN
CROSS INSURANCE, INC. - SOUTHWEST CONNECTICUT**

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

N/C

Electronic Filing Menu

Corporate Filing Menu

Help

JAN 31 2020

D CONNELL

State of Maine



Department of the Secretary of State

I, the Secretary of State of Maine, certify that according to the provisions of the Constitution and Laws of the State of Maine, the Department of the Secretary of State is the legal custodian of the Great Seal of the State of Maine which is hereunto affixed and that the paper to which this is attached is a true copy from the records of this Department.

In testimony whereof, I have caused the Great Seal of the State of Maine to be hereunto affixed. Given under my hand at Augusta, Maine, this twenty-ninth day of January 2020.



A handwritten signature in black ink, appearing to read "Matthew Dunlap", written over a horizontal line.

Matthew Dunlap
Secretary of State

DOMESTIC
BUSINESS CORPORATION
STATE OF MAINE

ARTICLES OF AMENDMENT

Cross Insurance, Inc. - Southwest Connecticut
(Name of Corporation)

File No. 20190945 D Pages 2
Fee Paid \$ 50
DCN 2200242290008 LNME
FILED
01/23/2020


Deputy Secretary of State

A True Copy Which Attested By Signatures

Deputy Secretary of State

Pursuant to 13-C MRSA §1806 and/or §1804, §1805, §1811, the undersigned corporation executes and delivers the following Articles of Amendment:

FIRST: The amendment was adopted on (date) December 18, 2019.

The text of the amendment or the information required by 13-C MRSA §121.10.E as set forth in Exhibit A.

The amendment was duly approved as follows: ("X" one box only.)

☐
☐
☒

by the incorporators - shareholder approval was not required OR
by the board of directors - shareholder approval was not required OR
by the shareholders in the manner required by this Act and by the articles of incorporation OR if

SECOND: This is a Benefit Corporation and the following changes were approved by at least the minimum status vote as defined in 13-C MRSA §1802.7. (Check only if applicable)

☐
☐
☐

designation as a benefit corporation pursuant to 13-C MRSA §1804
add, amend or delete identification of a specific public benefit that it is the purpose of the benefit corporation to create as set forth in Exhibit _____ pursuant to 13-C MRSA §1811.4
termination as a benefit corporation pursuant to 13-C MRSA §1805

THIRD: If the amendment provides for an exchange, reclassification or cancellation of issued shares, provisions for implementing the amendment, if not contained in the amendment itself, are set forth in Exhibit _____ or as follows:

FOURTH: The effective date of the articles of amendment (if other than the date of filing) is _____.

Dated January 21, 2020

*By


(original written & printed)

Royce M. Cross

Chairman of the Board

(type or print name)

(title of signor)

*This document MUST be signed by any duly authorized officer OR the clerk. (13-C MRSA §121.5)

Submit completed form to: Secretary of State
Division of Corporations, UCC and Commissioners
101 State House Station, Augusta, ME 04333-0101
Telephone Inquiries: (207) 624-7793 Email Inquiries: CEC.Corporations@Maine.gov
FORM NO. MBCA-9 (1 of 1) Rev. 9/19/2019

EXHIBIT A

CROSS INSURANCE, INC. - SOUTHWEST CONNECTICUT

NATURE OF CHANGE: Change in name of corporation.

TEXT: That Article FIRST of the corporation's Articles of Incorporation is amended to read as follows: "The name of the corporation is Rand Insurance, Inc."

[EP - 03127012 - v2]

From: 95475341508 Page: 1/1 Date: 1/28/2020 12:01:21 PM



January 28, 2020

FLORIDA DEPARTMENT OF STATE
Division of Corporations

G.L. HOMES

SUBJECT: VALENCIA BAY HOMEOWNERS ASSOCIATION, INC.
REF: N15000006761

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Please retitle the document to remove the word "Certificate".

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Terri J Schroeder
Regulatory Specialist III

FAX Aud. #: H20000023212
Letter Number: 020A00001988

plus see attached