

F19000005134

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

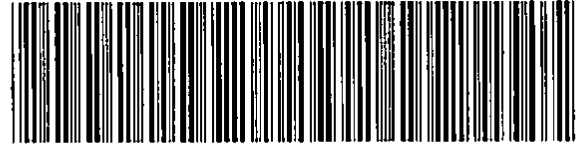
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FILED
2024 MAY - 6 PM 4:54
SECRETARY OF STATE

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Hyatt Legal Plans

Name of Corporation

DOCUMENT NUMBER: F19000005134

The enclosed Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Myndi Funes

Name of Contact Person

MetLife Legal Plans, Inc.

Firm/Company

11330 Olive Blvd. 6-B106

Address

St. Louis, MO 63141

City/State and Zip Code

myndi.funes@metlife.com

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

For further information concerning this matter, please call:

Myndi Funes

at (314)

756-1435

Name of Contact Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$35 Filing Fee

☐ \$43.75 Filing Fee &
Certificate of Status

☐ \$43.75 Filing Fee &
Certified Copy

☐ \$52.50 Filing Fee,
Certificate of Status &
Certified Copy

check #
001785657
pre-paid

Mailing Address:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

SECTION I
(1-3 MUST BE COMPLETED)

(Document number of corporation (if known))

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

(Incorporated under laws of)

(Date authorized to do business in Florida)

4. If the amendment changes the name of the corporation, when was the change effected under the laws of its jurisdiction of incorporation? December 19, 2019 at 9:05 A.M.

(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. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent

(Florida street address)

New Registered Office Address: _____, Florida _____
(City) (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

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2024 MAY -6 PM 4:53
SECRETARY OF STATE
ALBANY, NEW YORK

9. If the amendment changes person, title or capacity in accordance with 607.1504 (4), indicate that change:

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

10. 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.

BLS

Michelle A. Klotzbach

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

Michelle A. Klotzbach

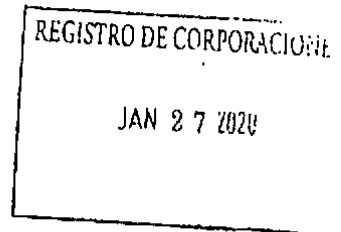
(Typed or printed name of person signing)

Vice President

(Title of person signing)

FILING FEE \$35.00

CERTIFICATE OF AMENDMENT
OF
CERTIFICATE OF AMENDMENT AND RESTATEMENT
OF CERTIFICATE OF INCORPORATION
OF
HYATT LEGAL PLANS, INC.



Pursuant to Section 242
of the General Corporation Law of the State of Delaware

Hyatt Legal Plans, Inc. (the "Corporation"), a corporation duly organized and existing under the General Corporation Law of the State of Delaware (the "DGCL"), does certify that:

1. The Certificate of Incorporation of the Corporation is hereby amended by deleting its section 1 and inserting in its place:

"1. The name of the corporation is MetLife Legal Plans, Inc. (the "Corporation")."

2. That this amendment of the Certificate of Incorporation was duly adopted by the Board of Directors of the Corporation pursuant to Section 242 of the DGCL.

IN WITNESS WHEREOF, the Corporation has caused this certificate to be signed this 17th day of December, 2019.

HYATT LEGAL PLANS, INC.

By: Ingrid Tolentino
Name: Ingrid Tolentino
Title: President and Chief Executive Officer

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF AMENDMENT OF "HYATT LEGAL PLANS, INC.", CHANGING ITS NAME FROM "HYATT LEGAL PLANS, INC." TO "METLIFE LEGAL PLANS, INC.", FILED IN THIS OFFICE ON THE NINETEENTH DAY OF DECEMBER, A.D. 2019, AT 9:05 O'CLOCK A.M.

A FILED COPY OF THIS CERTIFICATE HAS BEEN FORWARDED TO THE NEW CASTLE COUNTY RECORDER OF DEEDS.

REGISTRO DE CORPORACIONES

JAN 27 2020



2215867 8100
SR# 20198742358

You may verify this certificate online at corp.delaware.gov/authver.shtml

A handwritten signature in black ink, appearing to read "JBullock", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed.

Jeffrey W. Bullock, Secretary of State

Authentication: 204281296
Date: 12-23-19