

**F93000004898**

Florida Department of State  
Division of Corporations  
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**COR AMND/RESTATE/CORRECT OR O/D RESIGN****BAKER, THOMSEN ASSOCIATES INSURANCE SERVICES, A CALI**

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**C.COULLIETTE**

MAR 10 2009

**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.)

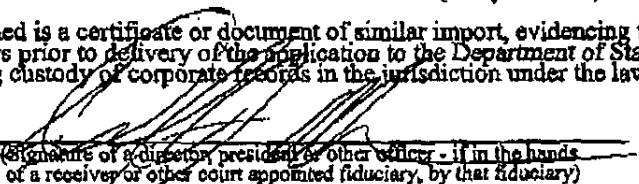
**SECTION I**  
**(1-3 MUST BE COMPLETED)**

F93000004898

(Document number of corporation (if known))

1. Baker, Thomson Associates Insurance Services, A California Corporation  
(Name of corporation as it appears on the records of the Department of State)
2. California 3. 10/28/1993  
(Incorporated under laws of) (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? 01/06/2009
5. PAQ Insurance Services, Inc.  
(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.
-   
(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)

David J. Thomson

(Typed or printed name of person signing)

President

(Title of person signing)

**State of California  
Secretary of State**

I, DEBRA BOWEN, Secretary of State of the State of California, hereby certify

That on the 15th day of October, 1980, **BAKER, THOMSEN ASSOCIATES INSURANCE SERVICES** became incorporated under the laws of the State of California by filing its Articles of Incorporation in this office.

That on the 6th day of January, 2009, there was filed in this office an amendment to set forth a change of corporate name from **BAKER, THOMSEN ASSOCIATES INSURANCE SERVICES** to **PAQ INSURANCE SERVICES, INC.**

I further certify, that according to the records of this office, said corporation is authorized to exercise all its corporate powers, rights and privileges and is in good legal standing in the State of California

IN WITNESS WHEREOF, I execute this  
certificate and affix the Great Seal  
of the State of California this day  
of March 6, 2009



*Debra Bowen*

**DEBRA BOWEN**  
Secretary of State

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