Division of Corporations Electronic Filing Cover Sheet

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(((H11000117625 3)))



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Account Name : CORPORATION SERVICE COMPANY

Account Number : 120000000195 Phone : (850)521-1000 Fax Number : (850)558-1515

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Email Address:

COR AMND/RESTATE/CORRECT OR O/D RESIGN STERLING NATIONAL INSURANCE AGENCY, INC.

Certificate of Status	0
Certified Copy	1
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04/29/11

4/28/2011

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B52-547v6881

April 28, 2011

FLORIDA DEPARTMENT OF STATE

STERLING NATIONAL INSURANCE AGENCY, INC. 210 INTERSTATE NORTH PKWY SUITE 400. LICENSING DEPT.

SUBJECT: STERLING NATIONAL INSURANCE AGENCY, INC.

REF: F97000005144

ATLANTA, GA 30339US

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 fill in the date on line #4 (date the amendment was filed in California 4-1-11).

If you have any questions concerning the filing of your document, please call (850) 245-6907.

Annette Ramsey Regulatory Specialist II FAX Aud. #: H11000117625 Letter Number: 711A00010396

RECEIVED
11 APR 28 AM 9: 01
SECRETARY OF STATE

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)

F97000005144		2 2 3
(Document number of corporation (if known)		28
1 Sterling National Insurance Agency, Inc.		3
	s on the records of the Department of State)	, N
		5
2. California	3.10/01/1997	7.164.A.
(Incorporated under laws of)	(Date authorized to do busin	iess in Florida)
. OP		
SE (4-7 COMPLETE ONL)	CTION II y the applicable changes)	
	,	•
4. If the amendment changes the name of the corporat	ion, when was the change effected und	ler the laws of
its jurisdiction of incorporation? 4-1-2011		
5. QBE FIRST Insurance Agency, Inc.	CC 12 4 1 16 16 17 27 00 11	la someoneted II on
(Name of corporation after the amendment, adding appropriate abbreviation, if not contained in new r	aame of the corporation)	incorporateu, or
	• • •	
(If new name is unavailable in Florida, enter alterna business in Florida)	te corporate name adopted for the purp	ose of transacting
6. If the amendment changes the period of duration, ir	ndicate new period of duration.	
	•	
	ew duration)	
·		
7. If the amendment changes the jurisdiction of incorp	oration, indicate new jurisdiction.	
	ew jurisdiction)	
James T. Sh. V.	· .	•
(Signature of a director, president or other officer - if of a receiver or other court appointed fiduciary, by the	in the names lat fiduciary)	
James P. Novak	Secretary	
(Typed or printed name of person sign	ning) (Title of pe	rson signing)



State of CaliforniaSecretary of State

CERTIFICATE OF FILING

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

That on the 1st day of April, 2011, there was filed in this office an amendment changing the corporation name from STERLING NATIONAL INSURANCE AGENCY, INC., a California corporation, to QBE FIRST INSURANCE AGENCY, INC.

IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of April 26, 2011.



Jena Bowen

DEBRA BOWEN Secretary of State