(Requestor's Name) (Address) (Address)	500332757155		
(City/State/Zip/Phone #)			
Certified Copies Certificates of Status Special Instructions to Filing Officer:	RECEIVED 2019 AUG - 2 PH 1: 38 Naturna Steppedorum FALLAHASSEE, FLORIDA		
Office Use Only	T SCHROEDER		

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CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195

:

REFERENCE : 863471 8209622

AUTHORIZATION

COST LIMIT

- ORDER DATE : July 29, 2019
- ORDER TIME : 11:31 AM
- ORDER NO. : 863471-070

CUSTOMER NO: 8209622

FOREIGN FILINGS

NAME: WILLIS OF TENNESSEE, INC.

- XX CORPORATE
- _____ LIMITED PARTNERSHIP
- _____ LIMITED LIABILITY COMPANY
- XXXX AMENDMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_____ CERTIFIED COPY

XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Roxanne Turner -- EXT# 62969

EXAMINER: _____

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)

F98000004946

(Document number of corporation (if known)

Willis of Tennessee, Inc.

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

2. Tennessee

(Incorporated under laws of)

3.___

(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? 08/01/2019

5 Willis Towers Watson Southeast, 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 public business in Florida)	urpose of t		cting
6. If the amendment changes the period of duration, indicate new period of duration.		9 AUG -2	
(New duration)		:6 H¥	
7. If the amendment changes the jurisdiction of incorporation, indicate new jurisdiction.		 37	
(New jurisdiction)			
8. Attached is a certificate or document of similar import, evidencing the amendment, auth 90 days prior to delivery of the application to the Department of State, by the Secretary having custody of corporate records in the jurisdiction under the laws of which it is incomplete.	of State or	not m other	ore than official

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

Heather D.B. Naaktgeboren

(Typed or printed name of person signing)

Secretary

(Title of person signing)



Tre Hargett Secretary of State

CFS STE B 992 DAVIDSON DR NASHVILLE, TN 37205-1051

Division of Business Services Department of State

State of Tennessee 312 Rosa L. Parks AVE, 6th FL Nashville, TN 37243-1102

August 1, 2019

Control # 218207

Receipt # : 4949201 Filing Fee: \$20.00 Effective Date: 07/31/2019

CERTIFICATE OF NAME CHANGE

I, Tre Hargett, Secretary of State of the State of Tennessee, do hereby certify that Articles of Amendment of **WILLIS OF TENNESSEE**, **INC.** were filed in this office on the effective date noted above, changing the name to **Willis Towers Watson Southeast, Inc.**

Tre Hargett Secretary of State

Processed By: Stephanie Booker