P00/00

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

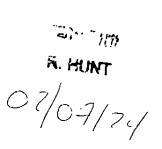
Office Use Only



400423426484

70 07 (24) -010, 3--015 (4) 48, 75

22322 - 7 PM 4:08



COVER LETTER

TO: Amendme	ent Section Division of Corporati	ons				
SUBJECT: Lomba	ard International Life Assurance (Company				
	Name	e of Corporation				
DOCUMENT NU	MBER: P00100					
The enclosed Ame	ndment and fee are submitted for	filing.				
Please return all co	rrespondence concerning this ma	tter to the following:				
Casey O'Donnell						
	Name of Contact Person					
Westmont Associa	ates, Inc.				وابد. ه	
	Firm/Company	<u></u>				
1763 Marlton Pike	East, Suite 200				1:3	
	Address				:	1
Cherry Hill, NJ 08	003			E CO	-7 PH 4:08	į
	City/State and Zip Code			TATE	. 0 8	
casey@westmonth	aw.com			•••		
E-mail addre	ss: (to be used for future annual r	eport notification)	_			
For further informa	ation concerning this matter, plea	se call:				
Casey O'Donnell		at () 216-0.	220			
Name	e of Contact Person	at () Area Code & Day	time Telephone	: Number		
Enclosed is a check	k for the following amount:					
]\$35 Filing Fee		☐ \$43.75 Filing Fee Certified Copy	Certif	2.50 Filin ficate of S fied Copy	Status	

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

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)

P00100	
(Document nur	mber of corporation (if known)
1. Lombard International Life Assurance Company	
(Name of corporation as it appe	ears on the records of the Department of State)
2. Pennsylvania	3. 12/02/1983
(Incorporated under laws of)	(Date authorized to do business in Florida)
	**. :
•	SECTION II
(4-7 COMPLETE ON	LY THE APPLICABLE CHANGES)
	TLY THE APPLICABLE CHANGES) ation, when was the change effected under the laws of
4. If the amendment changes the name of the corpor	ation, when was the change effected under the laws of
its jurisdiction of incorporation? 1/22/2024	
5. Axcelus Financial Life Insurance Company	f ⁺ 1
(Name of corporation after the amendment, addin	g suffix "corporation," "company," or "incorporated," or
appropriate abbreviation, if not contained in new	name of the corporation)
Not Applicable	
(If new name is unavailable in Florida, enter alternous business in Florida)	nate corporate name adopted for the purpose of transacting
•	
6. If the amendment changes the period of duration,	indicate new period of duration.
Not Applicable	(New duration)
7. If the amendment changes the jurisdiction of incommon Not Applicable	rporation, indicate new jurisdiction.
	New jurisdiction)
 Attached is a certificate or document of similar in 90 days prior to delivery of the application to the l having custody of corporate records in the jurisdic 	pport, evidencing the amendment, authenticated not more than Department of State, by the Secretary of State or other official ction under the laws of which it is incorporated.
(A) (A)	112
(Signature of a director, p	president or other officer - if in the hands
John F. Reilly	urt appointed fiduciary, by that fiduciary) Secretary
(Typed or printed name of person signing)	(Title of person signing)

Pennsylvania Department of State

Bureau of Corporations and Charitable Organizations PO Box 8722 | Harrisburg, PA 17105-8722 T:717-787-1057 dos.pa.gov/BusinessCharities

Entity Name: Lombard International Life Assurance Company

Jurisdiction: PENNSYLVANIA Issuance Date: 01/17/2024

Entity No.: 0002672362 Receipt No.: 000864332

Entity Type: Domestic Business Corporation Certificate No.: 028725424

Document Listing

Image No.Date FiledEffective DateFiling DescriptionNo. of PagesB0647-061801/12/202401/22/2024Articles of Amendment - Domestic Corporation3

** **** ***** ****** End of list ****** ***** ****

I, Albert Schmidt, Secretary of the Commonwealth of Pennsylvania, do hereby certify that the attached document(s) referenced above are true and correct copies and were filed in this office on the date(s) indicated above.



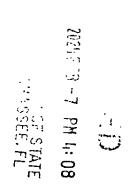
IN TESTIMONY WHEREOF, I have hereunto set my hand and caused the seal of my office to be affixed, the day and year above written

ALBERT SCHMIDT

Secretary of the Commonwealth

Men Solm

Verify this certificate online at www.file.dos.pa.gov







013709732



01/17/2024

Date:

028725424

Verification No.

ertificate

COMMONWEALTH OF PENNSYLVANIA

Department of State

Rureau of Corporations and Charitable

Bureau of Corporations and Charitable Organizations PO Box 8722

Harrisburg, Pennsylvania 17105-8722

ARTICLES OF AMENDMENT - DOMESTIC CORPORATION

Fee: \$70

Pennsylvania Department of State

-FILED-

Amendment #: 0013709732 Date Filed: 1/12/2024 Effective On: 1/22/2024

	15 / § 2104 / § 2305 / § 2704 / § 2904 / § 3304 / § 5915 / § mendment/election/termination), the undersigned, desiring	
Record Information		
File number	0002672362	
Current name	Lombard International Life Assurance Company	
Date of incorporation	01/01/1753	
Filing type	Domestic Business Corporation	
For profit filing subtype		
Business Subtype Change Change business filing subtype?	I do not want to change the filing subtype of the corporation	
Corporate Name Change Profit Corporation name	Axcelus Financial Life Insurance Company	
Supporting Documents Approval Letter Upload	AxcelusFinancialLIC(D).pdf	
Current Registered Office or Commercial Registered Office Provider Address	1650 MARKET STREET 8TH FLOOR PHILADELPHIA, PA 19103	
	PHILADELPHIA TO TO THE STATE OF	
New Registered Office I do not want to change the registered office	O9	
Stock		
The corporation is organized on a stock share basis and the		
Number of shares of stock authorized	1,849,999	
Formation Statute Profit corporation - select one	Business Corporation Law of 1988	
Effective Date The filing shall be effective on a future specific date		
The effective date is	01/22/2024	
Time	12:01 am	
Additional changes to the articles, if any Additional changes	There are no additional changes	

EVP	John Reilly	01/12/2024
run	John Daith	01/12/2024
a duly authorized office	- · · · · · · · · · · · · · · · · · · ·	aused these Articles of Amendment to be signed by

Certificate Verification No.: 028725424 Date: 01/17/2024

75 ×1718 -7 PH 4: 09



December 28, 2023

John Reilly Lombard International

Via E-mail: jreilly@lombardinternational.com

RE: Name Approval

Axcelus Financial Life Insurance Company

Dear Mr. Reilly:

The following information is being provided in response to your request received on December 27, 2023.

Please be advised that the phrasing of the above-referenced name has been reviewed and found to be acceptable to the Pennsylvania Insurance Department. You will need to present a copy of this letter to the Pennsylvania Department of State, Corporation Bureau. In processing the registration of the name, the Department of State will verify that the new name is not being used by an existing entity or that the name does not too closely resemble that of an existing entity.

Please note that this letter is to approve the use of a name only, it does not represent any form of licensure.

Please feel free to contact me at (717) 783-2660 should you have any questions.

Sincerely,

Date:

028725424

ertificate Verification No.:

1st Steven L. Yerger

Steven L. Yerger, PIR Insurance Company Licensing Specialist Company Licensing Division