

2016-10-19 12:50:22 CST

19542080845 From: Ranae McGraw

COVER LETTER

TO: Amendment Section Division of Corporations

MetLife General Insurance Agency, Inc. SUBJECT:

Name of Corporation

DOCUMENT NUMBER: P00572

The enclosed Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Robert Raphael

Name of Contact Person

MetLife

Firm/Company

1095 Avenue of the Americas

Address

New York, New York 10036

City/State and Zip Code

rraphael1@metlife.com

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

For further information concerning this matter, please call:

Robert Raphael	212	578-2253
Name of Contact Person) 2 Daytime Telephone Number
	1100 00000	e Dajame i viepnone ramoer

Enclosed is a check for the following amount:

\$35.00 Piling Fee

\$43.75 Filing Fee & Certificate of Status

\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)

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

Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 To: Page 5 of 6

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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)

	P00572			3	
(Document number of corporation (if known)			30 8 19		
1.	MetLife General Insurance Agency, Inc.		52.		11
	(Name of corporation as it appear	s on the records of the Department of State)	No.	ŝ	1
2.	Delaware	3. 01/12/1984	19		ΕD
	(Incorporated under laws of)	3. (Date authorized to do business in	1 Florida)	9:59	_

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? July 15, 2014

5. Enterprise General Insurance Agency, 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 jurisd	iction of incorporation, indicate new jurisdiction.
	(New jurisdiction)
 Attached is a certificate or documen 90 days prior to delivery of the appli having custody of corporate records M 	t of similar import, evidencing the amendment, authenticated not more than cation to the Department of State, by the Secretary of State or other official in the jurisdiction under the laws of which it is incorporated.
(Signatu of a rect	e of a director, president or other officer - if in the hands iver or other court appointed fiduciary, by that fiduciary)
Robert Raphael	Assistant Secretary
(Typed or printed name of pers	on signing) (Title of person signing)

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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THAT THE SAID 'METLIFE GENERAL INSURANCE AGENCY, INC.', FILED A CERTIFICATE OF AMENDMENT, CHANGING ITS NAME TO 'ENTERPRISE GENERAL INSURANCE AGENCY, INC.' ON THE FIFTEENTH DAY OF JULY, A.D. 2004, AT 12:47 O'CLOCK P.M.



2016025 8320 SR# 20165348363

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

Authentication: 202821675 Date: 08-12-16

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