P0400064314

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: Tower Hill S	Select Insurance	Company		
	BER: P040006431				
	of Amendment and fee are sul				
Please return all corre	spondence concerning this mat	ter to the following:			
	Scott P. Rowe				
	Name of Contact Person				
	Tower Hill Insurar	nce Group, LLC			
		Firm/ Company			
	7201 NW 11th Pla	ace			
		Address			
	Gainesville, FL 32	2605			
		City/ State and Zip Code	e		
src	we@thig.com				
		ed for future annual report	notification)		
For further information	on concerning this matter, pleas		, 333-1439		
Name of Contact Person			de & Daytime Telephone Number		
	or the following amount made p		•		
□ \$35 Filing 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			Address		
Amendment Section		Amendment Section			
Division of Corporations P.O. Box 6327		Division of Corporations Clifton Building			
	lahassee, FL 32314		xecutive Center Circle		
	,		assee, FL 32301		

Articles of Amendment to Articles of Incorporation of

FILED SECRETARY OF STATE TALLAHASSEE, FLORIDA

12 AUG -2 AM 9: 43 **Tower Hill Select Insurance Company** (Name of Corporation as currently filed with the Florida Dept. of State) P04000064314 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: N/A name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." N/A B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: N/A (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: . Florida (City) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

X Change	PT John	Doe	
X Remove	V Mike	e Jones	
X Add	SV Sally	<u> Smith</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	CFO	Jerome Fadden	7201 N.W. 11th Place
Add			Gainesville, FL 32605
X Remove			
2) Change	CFO	Lane Bussey, III	7201 N.W. 11th Place
X Add			Gainesville, FL 32605
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change		**************************************	
Add			
Remove			
6) Change			_
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)				
V/A	(be specific)			
N/A				
· · · · · · · · · · · · · · · · · · ·	weeking the state of the state			
. If an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,			
provisions for implementing the ame	endment if not contained in the amendment itself:			
(if not applicable, indicate N/A)				
N/A				
	<u> </u>			

The date of each amendment(s) ac	July 27, 2012
Effective date if applicable:	
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
☐ The amendment(s) was/were ado by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.
	proved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):
"The number of votes cast	for the amendment(s) was/were sufficient for approval
by	
	(voting group)
action was not required.	opted by the board of directors without shareholder action and shareholder opted by the incorporators without shareholder action and shareholder
action was not required.	pied by the medipolators without shareholder action and shareholder
Dated Augus	t 1, 2012
Signature	(MAC)
	irector, president or ether officer - if directors or officers have not been
	d, by an incorporator — if in the hands of a receiver, trustee, or other court ted fiduciary by that fiduciary)
арроли	ica nauciary by mat nauciary)
	Donald C. Matz, Jr.
	(Typed or printed name of person signing)
	President
	(Title of person signing)