

P11582

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

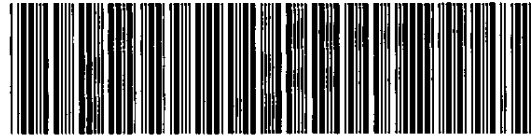
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



600184536096

*Name Change  
Amend*

600184536096  
08/26/10--01018--021 \*\$2.50

2010 AUG 26 AM 9:49  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

*BR  
8/27/10*

Merrill Lynch Life Insurance Company  
Administrative Office  
4333 Edgewood Road NE  
PO Box 3183  
Cedar Rapids, IA 52406-3183

August 25, 2010

**Via Federal Express**

Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**RE: APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO  
APPLICATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA**

Name Change of Merrill Lynch Life Insurance Company to  
Transamerica Advisors Life Insurance Company

Dear Sir or Madam:

Enclosed please find a fully executed original Amendment Application and check in the amount of \$52.50. Due to the fact that this application is being submitted as a result of the name change of Merrill Lynch Life Insurance Company to Transamerica Advisors Life Insurance Company (effective 7-1-2010), I have also enclosed an original certified copy of the Articles of Amendment issued by the domicile State of Arkansas evidencing the amendment.


Please note that the fees forwarded cover the following:

1. Application Filing Fee (\$35)
2. Request for Certificate of Status (\$8.75)
3. Request for Certified Copy (\$8.75)

Enclosed is a self-addressed postage paid envelope for your use in sending items 2 and 3 above.

If you need anything further in order to process the amendment please do not hesitate to contact me at [lkdvorak@aegonusa.com](mailto:lkdvorak@aegonusa.com) or (319) 355-4073. Thank you.

Sincerely,

  
Linda Kaye Dvorak  
Corporate Compliance Paralegal

LKD/Enclosures

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

Merrill Lynch Life Insurance Company name change to  
**SUBJECT:** Transamerica Advisors Life Insurance Company (effective 7-1-2010\_  
Name of Corporation

**DOCUMENT NUMBER:** \_\_\_\_\_

The enclosed Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Linda Kaye Dvorak  
Name of Contact Person

Transamerica Advisors Life Insurance Company  
Firm/Company

4333 Edgewood Road NE  
Address

Cedar Rapids, IA 52499  
City/State and Zip Code

lkdvorak@aegonusa.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Linda Kaye Dvorak at ( 319 ) 355-4073  
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- \$35.00 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:**  
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

**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)**

\_\_\_\_\_  
(Document number of corporation (if known))

**FILED**  
**2010 AUG 26 AM 9:50**  
**SECRETARY OF STATE**  
**TALLAHASSEE, FLORIDA**

1. Merrill Lynch Life Insurance Company  
(Name of corporation as it appears on the records of the Department of State)

2. Arkansas 3. 9-26-1986  
(Incorporated under laws of) (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? 07/01/2010

5. Transamerica Advisors Life Insurance Company  
(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)

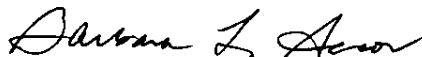
6. If the amendment changes the period of duration, indicate new period of duration.

No Change  
(New duration)

7. If the amendment changes the jurisdiction of incorporation, indicate new jurisdiction.

No Change  
(New jurisdiction)

8. Attached is a certificate or document of similar import, evidencing the amendment, authenticated not more than 90 days prior to delivery of the application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the laws of which it is incorporated.



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

Barbara L. Secor  
(Typed or printed name of person signing)

Assistant Secretary  
(Title of person signing)

**STATE OF ARKANSAS**  
**State Insurance Department**  
**CERTIFICATE**

**I, the undersigned Insurance Commissioner of Arkansas,  
do hereby certify that the foregoing documents hereto attached  
contain a true and complete copy of the**

**ARTICLES OF AMENDMENT  
OF THE  
ARTICLES OF INCORPORATION  
OF**

**MERRILL LYNCH LIFE INSURANCE COMPANY  
n/k/a TRANSAMERICA ADVISORS LIFE INSURANCE COMPANY**

**EFFECTIVE JULY 1, 2010**

**APPROVED JULY 20, 2010**

**And that the original is now among the files in my office.**



*In Witness Whereof, I have hereunto set my  
hand and affixed the official seal of this  
Department at the City of Little Rock,  
Arkansas, this 21st day of July, 2010.*

  
INSURANCE COMMISSIONER

**APPROVED**

JUL 20 2010

LEGAL  
ARKANSAS INSURANCE DEPT

ARTICLES OF AMENDMENT  
OF THE  
ARTICLES OF INCORPORATION  
OF  
MERRILL LYNCH LIFE INSURANCE COMPANY

Merrill Lynch Life Insurance Company (the "Corporation"), by its President and Secretary, does hereby certify that upon the written authorization of its sole shareholder on June 8, 2010, the Amended Articles of Incorporation set forth below were adopted in order to effect the name change of the Corporation from "Merrill Lynch Life Insurance Company" to "Transamerica Advisors Life Insurance Company", thereby amending the original Articles of Incorporation of the Corporation which became effective on August 30, 1991. Such Amended Articles of Incorporation and name change shall have an effective date of July 1, 2010 and shall be effective on the date these Articles are endorsed with the "approval" of the Arkansas Insurance Commissioner and placed on file in his office.

Article 1 of the Articles of Incorporation is amended and completely restated so as to provide as follows:

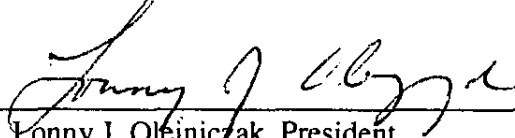
ARTICLE I - NAME

The name of the Corporation shall be Transamerica Advisors Life Insurance Company.

IN WITNESS WHEREOF, the undersigned President and Secretary of Merrill Lynch Life Insurance Company do hereby declare and certify that the statements set forth hereinabove are true and have hereunto set their hands this 10<sup>th</sup> day of June, 2010.

MERRILL LYNCH LIFE INSURANCE COMPANY


By:

  
\_\_\_\_\_  
Lonny J. Olejniczak, President

[SEAL]

ATTEST:

By:

  
\_\_\_\_\_  
Frank A. Camp, Secretary

