

Document Number Only

P12555

C T CORPORATION SYSTEM

660 East Jefferson Street

Requestor's Name

Tallahassee, Florida 32301

Address

(850) 222-1092

City State Zip Phone

100002963341--8

-08/18/99--01063--017

*****35.00 *****35.00

CORPORATION(S) NAME EFFECTIVE DATE

11/1/99

Pigna Indemnity Insurance Company
to:

ACE Indemnity Insurance Company

*Name
Change
Amend*

- | | | |
|--|---|---|
| <input type="checkbox"/> Profit | <input checked="" type="checkbox"/> Amendment | <input type="checkbox"/> Merger |
| <input type="checkbox"/> NonProfit | | |
| <input type="checkbox"/> Limited Liability Company | <input type="checkbox"/> Dissolution/Withdrawal | <input type="checkbox"/> Mark |
| <input type="checkbox"/> Foreign | | |
| <input type="checkbox"/> Limited Partnership | <input type="checkbox"/> Annual Report | <input type="checkbox"/> Other |
| <input type="checkbox"/> Reinstatement | <input type="checkbox"/> Fict. Filing | <input type="checkbox"/> Change of R.A. |
| <input type="checkbox"/> Limited Liability Partnership | <input type="checkbox"/> Photo Copies | <input type="checkbox"/> UCC-1 UCC-3 |
| <input type="checkbox"/> Certified Copy | | <input type="checkbox"/> CUS |
| <input type="checkbox"/> Call When Ready | <input type="checkbox"/> Call if Problem | <input type="checkbox"/> After 4:30 |
| <input checked="" type="checkbox"/> Walk In | <input type="checkbox"/> Will Wait | <input checked="" type="checkbox"/> Pick Up |
| <input type="checkbox"/> Mail Out | | |

99 AUG 18 PM 4:54
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

Name	8/18/99
Availability	
Document Examiner	ADR
Updater	ADR
Verifier	
Acknowledgment	
W.P. Verifier	

Please Return Extra Copy(s)
Filed Stamp

Thanks, Melanie

AUG 18

RECEIVED
AUG 13 3 11:08 PM '99

EFFECTIVE DATE
11/1/99
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)

FILED
99 AUG 18 PM 4:54
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. CIGNA Indemnity Insurance Company
Name of corporation as it appears on the records of the Department of State.
2. Pennsylvania
Incorporated under laws of
3. 12/10/1986
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? 8-13-99
5. ACE Indemnity Insurance Company (effective 11/1/99)
Name of corporation after the amendment, adding suffix "corporation", "company" or "incorporated," or appropriate abbreviation, if not contained in new name of the corporation.

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

New Duration

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

New Jurisdiction

Dennis B. Reding
Signature
Dennis B. Reding
Typed or printed name

August 13, 1999
Date
President
Title

COMMONWEALTH OF PENNSYLVANIA

DEPARTMENT OF STATE

AUGUST 13, 1999

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

ACE INDEMNITY INSURANCE COMPANY

I, Kim Pizzingrilli, Secretary of the Commonwealth of
Pennsylvania do hereby certify that the foregoing and annexed is a true
and correct photocopy of Articles of Amendment restating the Articles
of Incorporation in their entirety
which appear of record in this department



IN TESTIMONY WHEREOF, I have
hereunto set my hand and caused
the Seal of the Secretary's
Office to be affixed, the day
and year above written.

Kim Pizzingrilli

Secretary of the Commonwealth

JSOW



9953-1763

COMMONWEALTH OF PENNSYLVANIA
INSURANCE DEPARTMENT

OFFICE OF REGULATION OF COMPANIES
1345 Strawberry Square
Harrisburg, PA 17120

Phone (717) 787-1879
Fax (717) 787-8587

July 7, 1999

Liane Cagney
Westmont Associates, Inc.
25 Chestnut Street, Suite 105
Haddonfield, NJ 08033

RE: Name Change from CIGNA Indemnity Insurance Company to ACE Indemnity Insurance Company (NAIC #10030)

Dear Ms. Cagney:

The Department received the referenced name change request on July 2, 1999. The effective date for this name change will be November 1, 1999.

The Department does not provide amendments to the originally issued Certificate of Authority of domestic insurance companies. Future documents generated by the Department, i.e. Certificates of Compliance, etc., will be under the new name.

Please feel free to contact me at (717) 787-1879 should you have any questions.

Sincerely,

A handwritten signature in cursive script, appearing to read "Robert A. Kotal".

Robert A. Kotal
Insurance Company Licensing Specialist
Company Licensing Division

9953-1764

JUL 15 1999

Microfilm Number _____

Filed with the Department of State on _____

Entity Number 2661028

Secretary of the Commonwealth

ARTICLES OF AMENDMENT-DOMESTIC BUSINESS CORPORATION

DSCB: 15-1915 (Rev 90)

In compliance with the requirements of 15 Pa.C.S. § 1915 (relating to articles of amendment), the undersigned business corporation, desiring to amend its Articles, hereby states that:

CIGNA Indemnity Insurance Company

1. The name of the corporation is: _____

2. The (a) address of this corporation's current registered office in this Commonwealth or (b) name or its commercial registered office provider and the county of venue is (the Department is hereby authorized to correct the following information to conform to the records of the Department):

1601 Chestnut Street, Philadelphia, PA 19192

(a)	Number and Street	City	State	Zip	County

(b) c/o:	Name of Commercial Registered Office Provider	County

For a corporation represented by a commercial registered office provider, the county in (b) shall be deemed the county in which the corporation is located for venue and official publication purposes.

3. The statute by or under which it was incorporated is: Title 15, Pa. Statutes Part II, Subpart B, Article B, Chapter 13

4. The date of its incorporation is: 10/16/95

5. (Check, and if appropriate complete, one of the following):

☐ The amendment shall be effective upon filing these Articles of Amendment in the Department of State.

☒ The amendment shall be effective on: 11/1/99 at 12:00 am
Date Hour

6. (Check one of the following):

☒ The amendment was adopted by the shareholders (or members) pursuant to 15 Pa.C.S. § 1914(a) and (b).

☒ The amendment was adopted by the board of directors pursuant to 15 Pa.C.S. § 1914(c)

7. (Check, and if appropriate complete, one of the following):

☒ The amendment adopted by the corporation, set forth in full, is as follows:

RESOLVED, that the Articles of Incorporation be amended by changing Article One so that, as amended, said Article shall be and read as follows:

1. The name of the corporation is: ACE Indemnity Insurance Company

☐ The amendment adopted by the corporation is set forth in full in Exhibit A attached hereto and made a part hereof.

PA DEC 1 1999

PA DEC 1 1999

9953-1765

OSC8: 15-1915 (Rev 90)-2

8. (Check if the amendment restates the Articles):



The restated Articles of Incorporation supersede the original Articles and all amendments thereto.

IN TESTIMONY WHEREOF, the undersigned corporation has caused these Articles of Amendment to be signed by
a duly authorized officer thereof this 7th day of July 19 99.

CIGNA Indemnity Insurance Company

(Name of Corporation)

BY:

Richard C. Fick
(Signature)

TITLE: President

DSC8: 15-1915 (Rev 90)-3

9953-1766

RESTATED ARTICLES OF INCORPORATION

OF

ACE Indemnity Insurance Company

- FIRST:** The name of the Corporation is ACE Indemnity Insurance Company;
- SECOND:** The address of the Corporation's current registered office in this Commonwealth is: Two Liberty Place, 1601 Chestnut Street, Philadelphia, PA 19192;
- THIRD:** The purpose or purposes of the Corporation are:
- To engage, directly or indirectly, in the business of insurance and reinsurance and in all acts and/or activities reasonably and necessarily incidental to the business of insurance and reinsurance, lawful for a Corporation organized under the Corporation and Insurance Laws of the Commonwealth of Pennsylvania as these laws may be amended from time to time; and
- To issue policies or other contracts on a participating or non-participating basis and with or without corporate seal; and
- To have unlimited power to engage in and to do any lawful act concerning any and all lawful business for which business corporations may be incorporated under the Business Corporation Law of 1988.
- FOURTH:** The authorized capital stock of this Corporation shall be Three Million Five Hundred Thousand Dollars (\$3,500,000), divided into Seventy Thousand (70,000) shares of Fifty Dollars (\$50) per share. All stock shall be issued as provided by law and where issued shall be fully paid and nonassessable. The stock of the Company shall be entitled to one vote p share.
- FIFTH:** The term for which this Corporation shall exist shall be perpetual.
- SIXTH:** In furtherance and not in limitation of the powers conferred by statute, the board of directors is expressly authorized to make, alter and repeal the By-laws of the Corporation.
- SEVENTH:** This Corporation reserves the right to amend, alter, change and repeal any provision contained in these Articles of Incorporation in the manner now or hereafter prescribed by law and all rights conferred on officers, directors and stockholders herein are granted subject to this reservation.

9953-1767

IN WITNESS WHEREOF, the said Company has to these presents fixed its Corporate Seal and caused the same to be subscribed and attested to by its President and Secretary on the _____ day of _____, 1999.

ACE Indemnity Insurance Company

{ Corporate Seal }

By: _____
Richard C. Franklin
President

Attest:

George D. Mulligan
Secretary

COMMONWEALTH OF PENNSYLVANIA)
COUNTY OF PHILADELPHIA)

On the _____ day of _____, 1999, George D. Mulligan, Secretary of ACE Indemnity Insurance Company, being duly sworn according to law, deposes and says that the signature of Richard C. Franklin, President of said Company, is in his proper handwriting; that he, the said George D. Mulligan, was present at the execution of the said document, affixed his signatures thereto, and affixed the Corporate Seal of the said ACE Indemnity Insurance Company thereto.

George D. Mulligan, Secretary

Sworn to and subscribed before me
this _____ day of _____, 1999.

Notary Public

My commission expires: _____