Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850) 617-6380

From:

Account Name : LEGALZOOM.COM INC.

Account Number : I20010000062 Phone : (323) 962-8600 : (323)962-3889 Fax Number

Enter the email address for this business entity to be used for fut annual report mailings. Enter only one email address please.

Cmail	Address:	•	
		` <u></u>	

COR AMND/RESTATE/CORRECT OR O/D RESIGN AIG INSURANCE CORPORATION

RECEIVED OCT 1 1 20.3

Certificate of Status	0
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Corporate Filing Menu

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10/11/2018

TO: Amendment Section

Division of Corporations

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COVER LETTER

NAME OF CORPO	RATION: AIG INSURANCE	CORPORATION		
DOCUMENT NUM	BER:			
The enclosed Article:	s of Amendment and fee are sul	omitted for filing.		
Please return all corr	espondence concerning this mat	ter to the following:		
	Cheyenne Moseley			
	Name of Contact Person			
	LegalZoom.com, Inc.			
		Firm/ Company		
	101 N. Brand Blvd., 11th F	loor		
		Address		
	Glendale, CA 91203			
		City/ State and Zip Co	de	
Ala	ingz13@yahoo.com	sed for future annual repor	t solification)	
For further informati	on concerning this matter, pleas	se call:		
Cheyenne Mosele	у	at (800	773-0888 ext. 9724	
Nami	e of Contact Person	Area C	ode & Daytime Telephone Number	
Enclosed is a check	for the following amount made	payable to the Florida Dep	partment of State:	
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	✓ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52 50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
	ailing Address		t Address	
-	nendment Section vision of Corporations	=	ndment Section ion of Corporations	
	O. Box 6327		na Building	
Tallahassee, FL 32314			Executive Center Circle	
		Tallahassee, FL 32301		

	Articles of Amendme to	ent	
	Articles of Incorporati	ioa	
AIG	INSURANCE CORPO	RATION	_
(Name of Corporation as currently	filed with the Florida D	ept. of State)	_
	P18000055527		
(Document Number o	f Corporation (if known)		_
Pursuant to the provisions of section 607.1006, Florid its Articles of Incorporation;	la Statutes, this Florida I	Profu Corporation adopts the follow	ing amendment(s) to
A. If amending name, enter the new name of the c	orporation:		
Multi-Line Insurance Corporation name must be distinguishable and contain the wo			The new
word "chartered," "professional association," or the B. Enter new orincipal office address, if applicable (Principal office address MUST BE A STREET AD	lei		
C. Enter new mailing address, if applicable; (Mailing address MAY BE A POST OFFICE BO	2 <i>X</i>)	2	2010 OCT 1 SEÇRÇTA
D. If amonding the registered agent and/or registered new registered agent and/or the new registered	i office address:	ָּדָּ ר	RESESTION STATES
Name of New Registered Agent	<u> </u>		75 N
	(Florida street addre	25)	3 9
		. Florida	
New Registered Office Address:	(City)	(Zip Code)	_
New Registered Agent's Signature, if changing Re I hereby accept the appointment as registered agent.	gistered Agent: I am familiar with and	accept the obligations of the pasition	ı.
· · · · · · · · · · · · · · · · · · ·			

Signature of New Registered Agent, if changing

To P

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:

الأراب الأراب المحافظ الما المستواه والمستوارية المستوارية المستوارية المستوارية والمستوارية والمستوار

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairmon or Clerk; CEO = ChiefExecutive 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 D	QE.	
X Remove	$\underline{\mathbf{v}}$	Mike Jo	ones	
_X Add	<u>sv</u>	Sally S	mith	
Type of Action (Check One)	Title		Name	Address
i)Change				
Add				
Remove				
2) Change				
Add		_		
Remove				
3)Change				
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		_		
Add				
Remove				
				

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	option: 9/4/2018	is ashan shan sha
The date of each amendment(s) ado date this document was signed.	ption: 3142010	if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were adop by the shareholders was/were suff	ted by the shareholders. The number of votes east for the amendment(s) reient for approval.	
The amendment(s) was/were appromust be separately provided for e	oved by the shareholders through voting groups. The following statement ach voting group entitled to vote separately on the amendment(s):	
	or the amendment(s) was/were sufficient for approval	
by	"	
hy	(voting group)	
The amendment(s) was/were adop action was not required,	ted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were adopted to make not required.	ted by the incorporators without shareholder action and shareholder	
Dated 10/	3/2018	
Signature	ala la la	
(By a dir selected,	ector, president or other officer if directors or officers have not been by an incorporator — if in the hands of a receiver, trustee, or other court d fiduciary by that fiduciary)	
	Alain González	
_	(Typed or printed name of person signing)	
	Secretary	
-	(Title of person signing)	

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