

P26407

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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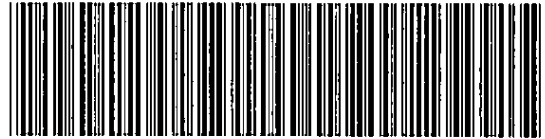
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FL

NC  
Amcl

R. WHITE  
SEP 11 2018

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: COMPUTER INSURANCE COMPANY

DOCUMENT NUMBER: P26407

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Deborah Gambone

Name of Contact Person

Aon Insurance Managers (USA), Inc.

Firm/ Company

76 St. Paul Street, Suite 500

Address

Burlington, Vermont 05401

City/ State and Zip Code

shayne.millette@aon.com

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

For further information concerning this matter, please call:

Deborah Gambone

Name of Contact Person

at ( 802 ) 264-4584

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

☐ \$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**

Amendment Section  
Division of Corporations  
P.O. Box 6327

**Street Address**

Amendment Section  
Division of Corporations  
Clifton Building

Digital Advantage Insurance Company

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76 ST. PAUL STREET  
SUITE 500  
BURLINGTON, VT 05401-4477

Telephone: (802) 862-4400  
Facsimile: (802) 860-0440

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

22 August 2018

**VIA FEDERAL EXPRESS**

Re: Computer Insurance Company, Document P26407  
Name Change through Articles of Amendment

To Whom It May Concern:

Computer Insurance Company, NAIC #34711, Document #P26407, recently changed its name in Rhode Island, its State of Domicile; as a result, the insurer will be preparing and submitting the NAIC UCAA Corporate Amendment Application to its States of Licensure's Departments of Insurance, including Florida, notifying the states of various corporate changes. The company hereby submits the Articles of Amendment for the name, **Digital Advantage Insurance Company** for use in Florida going forward. This foreign insurer was renamed with its State of Domicile's approval in mid-June. A check, in the amount of \$43.75 and payable to the Florida Department of State, is enclosed to cover the cost of this filing.

Please send any communication or Approval Letter for the name request to my attention, at the following address: Deborah Gambone, Aon Insurance Managers (USA) Inc., 76 St. Paul Street, Suite 500, Burlington, VT 05401. If you have any questions or concerns, please contact me at 802-264-4584, or via email at [deborah.gambone@aon.com](mailto:deborah.gambone@aon.com).

I thank you for your assistance in this matter.

Sincerely,

//Deborah Gambone//

Deborah Gambone  
Compliance Manager  
Aon Insurance Managers  
As Managers for Digital Advantage Insurance Company

Enclosures

FILED

Articles of Amendment  
to  
Articles of Incorporation  
of

2018 SEP -6 AM 8:45

SECRETARY OF STATE  
TALLAHASSEE, FL

COMPUTER INSURANCE COMPANY

(Name of Corporation as currently filed with the Florida Dept. of State)

P26407

(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:**

DIGITAL ADVANTAGE INSURANCE COMPANY

*The new 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."*

**B. Enter new principal office address, if applicable:**

(Principal office address MUST BE A STREET ADDRESS)

N/A

**C. Enter new mailing address, if applicable:**

(Mailing address MAY BE A POST OFFICE BOX)

N/A

**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 N/A

(Florida street address)

New Registered Office Address: N/A

(City)

Florida

(Zip Code)

**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.*

**Example:**

X Change                      PT      John Doe

X Remove                      V      Mike Jones

X Add                              SV      Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <u>X</u> Change	<u>CEOPD</u>	<u>David Brune</u>	<u>222 East 14th Street</u>
___ Add			<u>Cincinnati, OH 45202</u>
___ Remove			
2) <u>X</u> Change	<u>VTD</u>	<u>Kenneth Kuhn</u>	<u>222 East 14th Street</u>
___ Add			<u>Cincinnati, OH 45202</u>
___ Remove			
3) <u>X</u> Change	<u>VCFOD</u>	<u>Angela Homm</u>	<u>222 East 14th Street</u>
___ Add			<u>Cincinnati, OH 45202</u>
___ Remove			
4) <u>X</u> Change	<u>GC,SD</u>	<u>Laura Hoensch</u>	<u>555 College Road East</u>
___ Add			<u>Princeton, NJ 08453</u>
___ Remove			
5) ___ Change	<u>PTD</u>	<u>Zac Nesper</u>	<u>3000 Hanover Street</u>
___ Add			<u>Palo Alto, CA 94304</u>
<u>X</u> Remove			
6) ___ Change	<u>D</u>	<u>Sami Pennanen</u>	<u>3000 Hanover Street</u>
___ Add			<u>Palo Alto, CA 94304</u>
<u>X</u> Remove			

**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:*

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**Example:**

X Change                      PT      John Doe

X Remove                    V        Mike Jones

X Add                         SV      Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <input type="checkbox"/> Change	<u>SD</u>	<u>Peter Joy*</u>	<u>76 St. Paul Street, Suite 500</u>
<input type="checkbox"/> Add		*Mr. Joy will remain as VP.	<u>Burlington, VT 05401</u>
<input checked="" type="checkbox"/> Remove			
2) <input type="checkbox"/> Change	<u>D</u>	<u>Andreas Kleiner</u>	<u>7000 Midland Boulevard</u>
<input checked="" type="checkbox"/> Add			<u>Amelia, OH 45102</u>
<input type="checkbox"/> Remove			
3) <input type="checkbox"/> Change	<u>CD</u>	<u>Andrew Rear</u>	<u>30 Fenchurch Street</u>
<input checked="" type="checkbox"/> Add			<u>London EC3M 3AJ</u>
<input type="checkbox"/> Remove			<u>United Kingdom</u>
4) <input type="checkbox"/> Change	<u>V</u>	<u>Stacey Eisenbraun</u>	<u>222 East 14th Street</u>
<input checked="" type="checkbox"/> Add			<u>Cincinnati, OH 45202</u>
<input type="checkbox"/> Remove			
5) <input type="checkbox"/> Change	<u>V</u>	<u>Paul Wolfe</u>	<u>555 College Road East</u>
<input checked="" type="checkbox"/> Add			<u>Princeton, NJ 08453</u>
<input type="checkbox"/> Remove			
6) <input type="checkbox"/> Change	<u>V</u>	<u>Mark Van Emburgh</u>	<u>555 College Road East</u>
<input checked="" type="checkbox"/> Add			<u>Princeton, NJ 08453</u>
<input type="checkbox"/> Remove			

**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:*

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**Example:**

X Change                      PT      John Doe

X Remove                    V        Mike Jones

X Add                         SV      Sally Smith

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input type="checkbox"/> Change	<u>AS</u>	<u>Kyle Metayer</u>	<u>76 St. Paul Street, Suite 500</u>
<input checked="" type="checkbox"/> Add			
<input type="checkbox"/> Remove			
2) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
3) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
4) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
5) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
6) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			

**E. If amending or adding additional Articles, enter change(s) here:**

*(Attach additional sheets, if necessary). (Be specific)*

N/A

**F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:**

*(if not applicable, indicate N/A)*

N/A



The date of each amendment(s) adoption: 06/13/2018, if other than the date this document was signed.

Effective date if applicable: \_\_\_\_\_  
(no more than 90 days after amendment file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) (CHECK ONE)

☒ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.

☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for 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)

☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.

☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

August 22, 2018  
Dated \_\_\_\_\_

Signature \_\_\_\_\_  
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

Peter Joy  
\_\_\_\_\_  
(Typed or printed name of person signing)

Vice President  
\_\_\_\_\_  
(Title of person signing)