P30160

•								
(Re	questor's Name)							
(Ad	dress)							
(Ad	dress)							
(City/State/Zip/Phone #)								
PICK-UP	☐ WAIT	☐ MAIL						
(Business Entity Name)								
(Document Number)								
Certified Copies	Certificates	s of Status						
Special Instructions to Filing Officer:								
·								
•								

Office Use Only

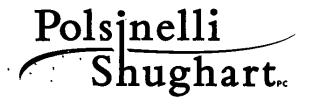


700185466667

09/30/10--01024--013 **52.50



Mare Changl 10-4-10



Ms. Shawn McFerrin (816) 572-4508 smcferrin@polsinelli.com

700 W 47th Street, Suite 1000 Kansas City, Missouri 64112 (816) 753-1000 Facsimile: (816) 753-1536

September 29, 2010

VIA FEDERAL EXPRESS

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

Re: Certificate of Status of Corporate Amendment for the

Name Change of Financial American Life Insurance Company

f/k/a Cardif Life Insurance Company

(NAIC 71455)

Dear Madam/Sir:

We have enclosed with this filing the following items, and request a certified Certificate of Status to submit to the Florida Office of Insurance Regulation ("FOIR"), to comply with requirements to notify the FOIR of corporate amendment name change for Financial American Life Insurance Company f/k/a Cardif Life Insurance Company:

- 1. Cover Letter.
- 2. Completed and originally executed Application by Foreign Profit Corporation to File Amendment to Application for Authorization to Transact Business in Florida,
- 3. Certificate of Amendment to the Amended and Restated Articles of Incorporation,
- 4. Certificate of Compliance with the Kansas Insurance Department,
- 5. \$52.50 filing fee.

Please forward the requested document/s to my attention at the address above. If you have any questions or require any additional information or documentation, please do not hesitate to contact either Robert B. Sullivan by telephone at (816) 360-4151 or by email at rsullivan@polsinelli.com, or me at the contact information referenced above.

Very truly yours,

Ms. Shawn McFerrin

Paralegal

Enclosures

cc: Robert B. Sullivan, Esq.

PLAZA-SEMCF-1891039.1

COVER LETTER

TO:	Amendment Section Division of Corporations	
SUBJ	JECT: Cardif Life	e Insurance Company
		•
DOC	UMENT NUMBER:	P30160
The e	nclosed Amendment and fee are subn	nitted for filing.
Pleas	e return all correspondence concernin	g this matter to the following:
	Robert B. Sullivan Name of Contact Person	
	C/O Polsinelli Shughart P	<u>c</u>
••••	700 W 47th Street, Suite 10	000
	Kansas City, Missouri 641 City/State and Zip Code	12
<u>I</u>	donna.marakas@cardif E-mail address: (to be used for future ann	us.com ual report notification)
For fi	urther information concerning this ma	tter, please call:
	Ms. Donna Marakas Name of Contact Person	at (305) 234-5045 Area Code & Daytime Telephone Number
Enclo	osed is a check for the following amou	int:
	\$35.00 Filing Fee Certificate of State	
Amer Divis P.O.	ing Address: Indiment Section Ission of Corporations Box 6327 hassee, 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)

	·						
	P30160				<u></u>		
	(Document number of corporation (if known)					in my to	
				7-1-3-1 1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1	_————————————————————————————————————	Section 1	
1.	Cardif Life Insurance				<u></u>	VIII IN	
	(Name of corporation as it appears on the reco	rds of the Department	of State)	ti vest	3		
				22 (1)	جب		
2.	. Kansas 3	. (Date authorized	7/11/199	00 gr. Elou	rida 5-5	·	
(Incorporated under laws of) (Date authorized to do ousiness in Horida)							
	SECTION II	I					
	(4-7 COMPLETE ONLY THE APPL)				
4.	. If the amendment changes the name of the corporation, when	~	ected unde	r the la	ws of		
	its jurisdiction of incorporation? August 30, 2010	! 					
5.	Financial American Life Insu	irance Company	,				
٥.	(Name of corporation after the amendment, adding suffix "cor appropriate abbreviation, if not contained in new name of the	poration," "compa	any," or "ir	corpora	ated,"	or	
	appropriate abbreviation, if not contained in new name of the	corporation)	•	•			
i	(If new name is unavailable in Florida, enter alternate corporat	e name adopted fo	r the purpo	se of tr	ansac	ting	
	business in Florida)						
_							
6.	. If the amendment changes the period of duration, indicate new	period of duration	a.			•	
	·						
	(New duration)		_			_	
7	. If the amendment changes the jurisdiction of incorporation, in	dicate new jurisdic	ction				
٠.	. If the unlendment changes the jurisdiction of meorpolation, in	dicate new jurisan	JUIOII.				
	(New jurisdiction	n)					
8.	. Attached is a certificate or document of similar import, eviden	icing the amendme	ent, authent	icated r	ot me	ore than	
	Attached is a certificate or document of similar import, eviden 90 days prior to delivery of the application to the Department having custody of corporate records in the jurisdiction under t	of State, by the Se	crétary of S	State or	other	official	
	10 10 10 10 1	Company and Company	t is incorpe	nuicu.			
_	Juna J. Malakar	SIGN HERE!					
	(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)						
	Donna J. Marakas	_	cretary				
-	(Typed or printed name of person signing)		person signin	g)			

State of Kansas

OFFICE OF SECRETARY OF STATE CHRIS BIGGS

I, CHRIS BIGGS, Secretary of State of the state of Kansas, do herby certify, that according to the records of this office.

I, CHRIS BIGGS Secretary of State of the State of Kansas, do hereby certify that I am the custodian of records of the State of Kansas relating to insurance corporations, and that I am the proper official to execute this certificate.

I FURTHER CERTIFY that FINANCIAL AMERICAN LIFE INSURANCE COMPANY is a regularly and properly organized insurance corporation under the laws of the state of Illinois, having filed a certificate of domestication in Kansas on the 1st day of June, A.D. 1964.

In testimony whereof:
I hereto set my hand and cause to be affixed my official seal. Done at the City of Topeka, this 10th day of September, A.D. 2010



CHRIS BIGGS SECRETARY OF STATE

CERTIFICATE OF AMENDMENT OF AMENDED AND RESTATED ARTICLES OF INCORPORATION CARDIF LIFE INSURANCE COMPANY

The undersigned, Cardif Life Insurance Company, a Kansas corporation (the "Corporation"), for the purpose of amending the Amended and Restated Articles of Incorporation of the Corporation, in accordance with the Kansas General Corporation Code, does hereby make and execute this Certificate of Amendment of the Amended and Restated Articles of Incorporation and does hereby certify that:

- 1. The business entity ID number of the Corporation is: 3612371
- 2. The name of the Corporation is: Cardif Life Insurance Company
- Article I of the Amended and Restated Articles of Incorporation shall be deleted in its entirety and replaced with the following:

The name of the corporation is: Financial American Life Insurance Company

Such amendment shall be effective upon filing with the Kansas Secretary of State and has been duly adopted in accordance with the provisions of Section 17-6602 of the Kansas General Corporation Code.

The undersigned hereby declares, under penalty of perjury under the laws of the State of Kansas, that the foregoing is true and correct and the undersigned has submitted the required fee.

Executed on the 20th day of August, 2010.

Cardif Life Insurance Company

Commissioner of Insurance

Date: 07-30-10

Zasale, President

Name: Michae

1336 **053** \$35.00

03:17:05 PM

I hereby certify this to be a true and correct copy of the original on file

1876002.2