

19300000 9469

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

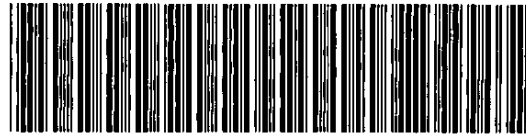
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Called 6/28 DATE GAE
DATE of suspension - 6/20
DEC
eff. 7/1/06

Office Use Only



500076420565

06/21/06--01063--001 **52.50

EFFECTIVE DATE
7/1/06

FILED
06 JUN 21 PM 2:42
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

NC
6/28

Via Federal Express

June 20, 2006

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

Re: Articles of Amendment

Dear Sir/Madam:

Enclosed please find check number 77450 in the amount of \$52.50 along with the Articles of Amendment to Articles of Incorporation for Space Coast Underwriters Insurance Agency, Inc. for filing with the Department of State.

Upon filing the document with the Department of State, please return a certificate of status to my attention at 4450 Sojourn Drive, Suite 500, Addison, Texas 75001.

Should you have any questions, please contact me directly at (972) 728-6358. Thank you for your assistance.

Sincerely,



Diane Carroll Havens
Corporate Paralegal

cc: David B. Snyder

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Space Coast Underwriters Insurance Agency, Inc.

DOCUMENT NUMBER: P93000009469

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

Please return all correspondence concerning this matter to the following:

David B. Snyder

(Name of Contact Person)

Affirmative Insurance Holdings, Inc.

(Firm/ Company)

4450 Sojourn Drive, Suite 500

(Address)

Addison, Texas 75001

(City/ State and Zip Code)

For further information concerning this matter, please call:

Diane Carroll Havens

(Name of Contact Person)

at (972) 728-6358

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☐ \$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
Tallahassee, FL 32314

Street Address

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

Articles of Amendment
to
Articles of Incorporation
of

FILED
06 JUN 21 PM 2:42
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Space Coast Underwriters Insurance Agency, Inc.

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

P930000009469

(Document number of corporation (if known))

EFFECTIVE DATE
7/1/06

Pursuant to the provisions of section 607.1006, Florida Statutes, this **Florida Profit Corporation** adopts the following amendment(s) to its Articles of Incorporation:

NEW CORPORATE NAME (if changing):

Affirmative Insurance Services of Florida, Inc.

(Must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.")

(A professional corporation must contain the word "chartered", "professional association," or the abbreviation "P.A.")

AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: **(BE SPECIFIC)**

(Attach additional pages if necessary)

If an amendment provides for 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)

(continued)

The date of each amendment(s) adoption.. 06/20/06

Effective date if applicable: 07/01/06
(no more than 90 days after amendment file date)

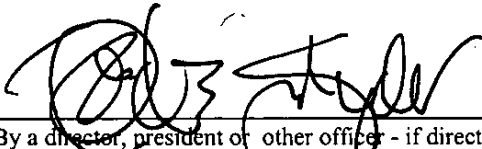
Adoption of Amendment(s) (CHECK ONE)

- ☐ The amendment(s) was/were approved 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.

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)

David B. Snyder

(Typed or printed name of person signing)

Senior Vice President

(Title of person signing)

FILING FEE: \$35