

P97000023596

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

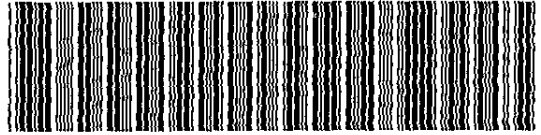
(Document Number)

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Denise GAVE  
AUTHORIZATION BY PHONE TO  
CORRECT Date of Adoption  
DATE \_\_\_\_\_  
DOC. EXAM AFM  
12/29/03

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300025597453

12/18/03--01028--005 \*\*43.75

EFFECTIVE DATE  
1/1/04

FILED  
03 DEC 19 PM 3:23  
CLERK OF STATE  
TALLAHASSEE, FLORIDA

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12/29/03

**TRANSMITTAL LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Corporate Name Change

**DOCUMENT NUMBER:** P97000023596

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

Please return all correspondence concerning this matter to the following:

Joel Nicolai

(Name of Person)

Re-Insurance Services, Inc.

(Name of Firm/ Company)

369 Bahia Court

(Address)

Longwood, FL 32750

(City/ State/ and Zip Code)

For further information concerning this matter, please call:

B A Hattaway, EA

(Name of Person)

at ( 407 ) 835-9336

(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  
(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  
409 E. Gaines Street  
Tallahassee, FL 32399

EFFECTIVE DATE  
1/1/04

FILED  
03 DEC 19 PM 3:23  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Articles of Amendment to  
Articles of Incorporation of

Commercial Group Underwriters, Inc.

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

P97000023596

(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:

**NEW CORPORATE NAME (if changing):**

Re-Insurance Services, Inc.

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

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

Article 1 - Name

(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: 12/16/03

Effective date, if applicable: 01/01/04  
(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.

Signed this 16th day of December, 2003

Signature

Joel Nicolai  
(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)

Joel Nicolai

(Typed or printed name of person signing)

President

(Title of person signing)

**FILING FEE: \$35**