

V03998

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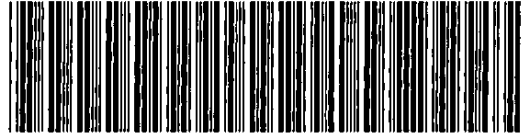
(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

06 DEC -4 PM 3:53

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Amend
SP



PO Box 407193 ■ Fort Lauderdale, Florida 33340
(954) 581-9993 office ■ (954) 316-9201 fax

October 31, 2006

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

RE: Articles of Amendment of Articles of Incorporation of
Federated National Insurance Company

Dear Sir/Madame:

Noted ✓

Please see the enclosed Articles of Amendment of Articles of Incorporation of Federated National Insurance Company which was originally submitted to the Division of Corporations in August 2005. The Articles of Amendment were then submitted to the Florida Department of Financial Services – Office of Insurance Regulation (OIR) for approval. The OIR returned the Articles of Amendment with its approval and instructions to forward a copy to the Division of Corporations for its files.

Thank you for your attention to this matter. Please do not hesitate to contact me if you have any questions at (954) 308-1257.

Sincerely,

A handwritten signature in black ink, appearing to read 'Michael H. Braun'.

Michael H. Braun
President

RECEIVED

RECEIVED

06 NOV -3 AM 8:00

06 NOV -2 AM 8:00

DIVISION OF CORPORATIONS

DIVISION OF CORPORATIONS

ARTICLES OF AMENDMENT
OF
ARTICLES OF INCORPORATION
OF
FEDERATED NATIONAL INSURANCE COMPANY

APPROVED

DOCUMENT NO.: V03998

Dictated by: CPM

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):

NOT APPLICABLE

(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.")

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

ARTICLE I. Name

The name of the corporation shall be **FEDERATED NATIONAL INSURANCE COMPANY**.
The principal place of business of this corporation shall be *3661 West Oakland Park Boulevard, Suite 300, Lauderdale Lakes, Florida 33311*.

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)

N/A

The date of each amendment(s) adoptions: August 16, 2005

Effective date if applicable: N/A
(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)

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TALLAHASSEE, FLORIDA

- ☒ 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 1st day of August, 2005.

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)

Michael H. Braun

(Typed or printed name of person signing)

President

(Title of person signing)

FILING FEE: \$35