



103364864

To the Director of the U. S. Patent and

Documents or the new address(es) below.

1-23-07

1. Name of conveying party(ies):

Space Coast Underwriters Insurance Agency, Inc.

- Individual(s)
- General Partnership
- Corporation- State: Florida
- Other _____
- Association
- Limited Partnership

Citizenship (see guidelines) _____

Additional names of conveying parties attached? Yes No

3. Nature of conveyance)/Execution Date(s) :

Execution Date(s) June 20, 2006 (effective July 1, 2006)

- Assignment
- Security Agreement
- Other _____
- Merger
- Change of Name

2. Name and address of receiving party(ies)

Additional names, addresses, or citizenship attached? Yes No

Name: Affirmative Insurance Services of Florida, Inc.

Internal _____

Address: _____

Street Address: 4450 Sojourn Drive, Suite 500

City: Addison

State: Texas

Country: USA Zip: 75001

- Association Citizenship _____
- General Partnership Citizenship _____
- Limited Partnership Citizenship _____
- Corporation Citizenship Florida
- Other _____ Citizenship _____

If assignee is not domiciled in the United States, a domestic representative designation is attached: Yes No
(Designations must be a separate document from assignment)

4. Application number(s) or registration number(s) and identification or description of the Trademark.

A. Trademark Application No.(s) _____

B. Trademark Registration No.(s)

3,043,755

Additional sheet(s) attached? Yes No

C. Identification or Description of Trademark(s) (and Filing Date if Application or Registration Number is unknown):

5. Name & address of party to whom correspondence concerning document should be mailed:

Name: Roger N. Chauza, Esq.

Internal Address: _____

Street Address: P.O. Box 140036

City: Irving

State: Texas Zip: 75014

Phone Number: (972) 518-1414

Fax Number: (972) 518-1124

Email Address: rchauza@txip.biz

6. Total number of applications and registrations involved:

1

7. Total fee (37 CFR 2.6(b)(6) & 3.41) \$ 40

- Authorized to be charged by credit card
- Authorized to be charged to deposit account
- Enclosed PREVIOUSLY PAID

8. Payment Information:

a. Credit Card Last 4 Numbers _____
Expiration Date _____

b. Deposit Account Number _____

Authorized User Name _____

9. Signature:

Signature

January 16, 2007

Date

Roger N. Chauza
Name of Person Signing

Total number of pages including cover sheet, attachments, and document: 5

Documents to be recorded (including cover sheet) should be faxed to (571) 273-0140, or mailed to:
Mail Stop Assignment Recordation Services, Director of the USPTO, P.O. Box 1450, Alexandria, VA 22313-1450

FILED

Articles of Amendment
to
Articles of Incorporation
of

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)

P93000009469

(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:

EFFECTIVE DATE
7/1/06

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

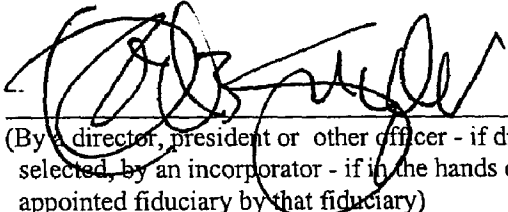
Effective date if applicable: 07/01/06
(no more than 90 days after amendment file date)

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



RECEIVED

JUL 05 2006

LEGAL

FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 30, 2006

DAVID B. SNYDER
AFFIRMATIVE INSURANCE HOLDINGS, INC.
4450 SOJURN DR., SUITE 500
ADDISON, TX 75001

Re: Document Number P93000009469

The Articles of Amendment to the Articles of Incorporation for SPACE COAST UNDERWRITERS INSURANCE AGENCY, INC. which changed its name to AFFIRMATIVE INSURANCE SERVICES OF FLORIDA, INC., a Florida corporation, were filed on June 21, 2006, effective July 1, 2006.

The certification requested is enclosed.

Should you have any question regarding this matter, please telephone (850) 245-6050, the Amendment Filing Section.

Karen Gibson
Document Specialist
Division of Corporations

Letter Number: 306A00042694

P.O. BOX 6327 -Tallahassee, Florida 32314

TRADEMARK
REEL: 003471 FRAME: 0569

State of Florida



Department of State

I certify the attached is a true and correct copy of the Articles of Amendment, filed on June 21, 2006, effective July 1, 2006, to Articles of Incorporation for SPACE COAST UNDERWRITERS INSURANCE AGENCY, INC. which changed its name to AFFIRMATIVE INSURANCE SERVICES OF FLORIDA, INC., a Florida corporation, as shown by the records of this office.

The document number of this corporation is P93000009469.

Given under my hand and the
Great Seal of the State of Florida
at Tallahassee, the Capitol, this the
Thirtieth day of June, 2006



CR2EO22 (01-06)

Sue M. Cobb
Sue M. Cobb
Secretary of State