## **AMENDMENT OF FOREIGN REGISTRATION STATEMENT**

Title 30, Chapter 21, Idaho Code Filing fee: \$30 typed, \$50 not typed

Complete and submit the application in duplicate.

For Office Use Only

## -FILED-

File #: 0003336117

Entity name: NFS Edge Insurance Agency, Inc.				Date Filed: 10/24/2018 2:26:00 PM
The entity name is ame			icy, Inc.	
	not available or permissible			oo is:
3. The entity type is amen	ided to:			
☐ Business Corporation ☐ Nonprofit Corporation ☐ Limited Liability Partne ☐ Limited Liability Compa	☐ General ☐ Limited		association Icluding a limited liability ess Trust, or Common-la	
Other:	(Prov	ride unlisted foreig	n entity type here)	
5. The street and mailing a	address(es) of its principal	office is amen	ded to:	
(Mailing Address, if different)	)			
3. The name, capacity, an	d mailing address of the g	overnor(s) is a	mended to:	
(Name)	(Capacity)	(Address)		
(Name)	(Capacity)	(Address)	·	
Typed Name: Mary Moor Signature: Vice Presiden			Secretary of State use only	

## State of Florida Department of State

I certify from the records of this office that AON EDGE INSURANCE AGENCY, INC. is a corporation organized under the laws of the State of Florida, filed on October 31, 2003.

The document number of this corporation is P03000123081.

I further certify that said corporation has paid all fees due this office through December 31, 2018, that its most recent annual report/uniform business report was filed on January 5, 2018, and that its status is active.

I further certify that said corporation has not filed Articles of Dissolution.

Given under my hand and the Great Seal of the State of Florida at Tallahassee, the Capital, this the Twenty-third day of October, 2018



Ken Deform Secretary of State

Tracking Number: CU0089586394

To authenticate this certificate, visit the following site, enter this number, and then follow the instructions displayed.

https://services.sunbiz.org/Filings/CertificateOfStatus/CertificateAuthentication