

833743

Florida Department of State
Division of Corporations
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H06000225397 3)))



H060002253973ABC1

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

RECEIVED
06 SEP 11 AM 8:00
DIVISION OF CORPORATIONS

To: Division of Corporations
Fax Number : (850) 205-0380
From: Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850) 222-1092
Fax Number : (850) 878-5926

COR AMND/RESTATE/CORRECT OR O/D RESIGN

ALLMERICA FINANCIAL LIFE INSURANCE AND ANNUITY COMPA

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

Help

NC

FILED
2006 SEP 11 AM 10:37
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED
215 561 2951
2006 SEP 11 AM 10:37

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PROFIT CORPORATION
APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO
APPLICATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA
(Pursuant to s. 607.1504, F.S.)

SECTION I
(1-3 MUST BE COMPLETED)


833743

(Document number of corporation (if known))

- 1. Allmerica Financial Life Insurance and Annuity Company
(Name of corporation as it appears on the records of the Department of State)
- 2. Massachusetts (Incorporated under laws of)
- 3. 01/31/1975 (Date authorized to do business in Florida)

SECTION II
(4-7 COMPLETE ONLY THE APPLICABLE CHANGES)

- 4. If the amendment changes the name of the corporation, when was the change effected under the laws of its jurisdiction of incorporation? 8/24/2006
- 5. Commonwealth Annuity and Life Insurance Company
(Name of corporation after the amendment, adding suffix "corporation," "company," or "incorporated," or appropriate abbreviation, if not contained in new name of the corporation)
n/a
(If new name is unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
- 6. If the amendment changes the period of duration, indicate new period of duration.
n/a
(New duration)
- 7. If the amendment changes the jurisdiction of incorporation, indicate new jurisdiction.
n/a
(New jurisdiction)


(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)
Samuel Ramos
(Typed or printed name of person signing)

8/24/06
(Date)
Secretary
(Title of person signing)



William Francis Galvin
Secretary of the
Commonwealth

The Commonwealth of Massachusetts

Secretary of the Commonwealth

State House, Boston, Massachusetts 02133

September 7, 2006

TO WHOM IT MAY CONCERN:

I hereby certify that

ALLMERICA FINANCIAL LIFE INSURANCE AND ANNUITY COMPANY

appears by the records of this office to have been incorporated under the General Laws of this Commonwealth on December 30, 2002.

I also certify that by Articles of Amendment filed here August 24, 2006, the name of said corporation was changed to

COMMONWEALTH ANNUITY AND LIFE INSURANCE COMPANY

I also certify that so far as appears of record here, said corporation still has legal existence.



In testimony of which,

I have hereto affixed the

Great Seal of the Commonwealth

on the date first above written.

William Francis Galvin

Secretary of the Commonwealth

Processed By jbm

