

F 9700000/288

DIRECT GENERAL INSURANCE COMPANY

1281 MURFREESBORO ROAD
NASHVILLE, TENNESSEE • 37217

CHRISTINE J. COHEE
(615) 365-3604 Phone
(615) 366-3722 Fax

January 12, 2001

Florida Secretary of State
Attention: Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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-01/24/01--01060--003
*****35.00 *****35.00

**RE: DIRECT GENERAL INSURANCE COMPANY:
APPLICATION FOR AMENDED CERTIFICATE OF AUTHORITY**

Dear Corporations Division:

Direct General Insurance Company redomesticated from Tennessee to South Carolina on December 28, 2000. Enclosed herewith, you will find an Application for Amendment; a certified copy of South Carolina's Certificate of Authority; and the requisite filing fee of \$35.00.

Direct General Insurance Company will continue to use the mailing address of 1281 Murfreesboro Road, Nashville, Tennessee. Please send the Amended Certificate of Authority to my attention at that address.

If you should have any questions regarding this matter, please call me directly at (615) 365-3604. Thank you for your assistance with this matter.

Sincerely,



Christine J. Cohee
Legal Assistant

Enclosures

FILED
01 JAN 24 PM 2:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

all 1-26-01
mend

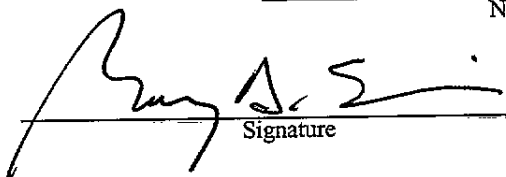
PROFIT CORPORATION
APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO
APPLICATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA
(Pursuant to s. 607.1504, F.S.)

SECTION I
(1-3 MUST BE COMPLETED)

1. Direct General Insurance Company
Name of corporation as it appears on the records of the Department of State.
2. South Carolina 3. 1-1-1991
Incorporated under laws of 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? N/A
5. Direct General 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.
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.
South Carolina
New Jurisdiction


Signature
Barry D. Elkins
Typed or printed name

1/2/01
Date
Vice President and CFO
Title

01 JAN 24 PM 2:48
SECRETARY OF STATE
TALLAHASSEE
FLORIDA

FILED



**South Carolina
Department of Insurance**

JIM HODGES
Governor

ERNST N. CSISZAR
Director of Insurance

Certificate of Authority

Company Code: 100312
Company Type: Stock (P&C)
State of Domicile: SC

License Effective Date: 12/31/1991
Amended: 01/02/2001

**DIRECT GENERAL INSURANCE COMPANY
NASHVILLE, TN**

The Director of Insurance of this State does hereby certify that the above named insurance company has complied with the requirements of the insurance laws of this State, and is hereby authorized subject to the provisions thereof and of the charter powers of said company, to do business of the kinds of insurance listed below which are specifically designated:

- 22 - Property
- 23 - Casualty
- 24 - Surety
- 25 - Marine

This Certificate shall remain in effect for an indefinite term unless said authority is amended or revoked in accordance with law or surrendered upon voluntary withdrawal from this State.

In testimony whereof, I hereto subscribe my name and affix the seal of my office at Columbia, South Carolina this 9th day of January, 2001.

A handwritten signature in black ink, appearing to read "E. N. Csiszar", written over a horizontal line.

Director of Insurance