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April 27, 2021



State of Rhode Island

Department of State - Business Services Division

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R.I. DEPT. OF STATE
BUS SYCS DIV STATEP

2021 APR 29 P 1: 11

Articles of Amendment

DOMESTIC Business Corporation

→ Filing Fee: \$50.00 (\$210 for an increase in authorized shares)

Pursuant to the provisions of R Articles of Amendment to its A	RIGL <u>7-1,2-905,</u> the undersigned of ticles of Incorporation:	orporation adopts the following
Entity ID Number:	2. The name of the corporati	on is:
000071475	Metropolitan Direct Property and Casualty Insurance Company	
by the board of directors of th	rporation (or, where no shares ha le corporation) in the manner pres ment(s) to the Articles of Incorpor	cribed by RIGL <u>7-1.2</u> April 8, 2021
4. If the entity's name is chan state the new name	ging, Farmers Direct Property and Casu	alty Insurance Company
		Check the box to indicate no change
5. If the total authorized share Total Authorized Sha (Number of Shares)		owing section: *List ALL authorized shares as of this amendment. Par Value Per Share
		Check the box to indicate no change
6. If the period of its duration	is changing complete the following	g section. CHECK ONE BOX ONLY
Perpetual (on-going)		
Date certain for dissoluti	on	Check the box to indicate no change
7. If the entity's purpose is characted in the State of Rhode		ction: *The new purpose should include ALL activity to be
Check the box to indicate an	attachment	Check the box to indicate no change

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 **Website:** www.sos.ri.gov

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8. If adding or amending additional provisions, complete the following s	section:
Check the box to indicate an attachment	Check the box to indicate no change 📝
9. As required by RIGL 7-1.2-105, the entity has paid all fees and taxes	5.
10. Date when these Articles of Amendment will be effective: CHECK	ONE BOX ONLY
✓ Date received (Upon filing)	
Later effective date (Date must be no more than 90 days from the	date of filing)
Under penalty of perjury, I declare and affirm that I have examined the accompanying attachments, and that all statements contained herein a	
Type or Print Name of Authorized Officer of the Corporation	Date
J. Nicole Pryor, Secretary	April 8, 2021
Signature of Authorized Officer of the Corporation Docusioned by: Junufur Mode Pryor	

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I, NELLIE M. GORBEA, Secretary of State of the State of Rhode Island, hereby certify that this document, duly executed in accordance with the provisions of Title 7 of the General Laws of Rhode Island, as amended, has been filed in this office on this day:

April 29, 2021 01:11 PM

Nellie M. Gorbea Secretary of State

Tullin U. Horler

