



Texas Department of Insurance  
Financial, Company Licensing & Registration, Mail Code 305-2C  
333 Guadalupe • P. O. Box 149104, Austin, Texas 78714-9104  
512-322-3507 telephone • 512-322-3550 fax • www.tdi.state.tx.us

## CCRC CHARTER AMENDMENT CHECKLIST NAME CHANGE

NOTE: All documents **must** contain original signatures and notarizations where appropriate. Documents requiring certification must contain original signatures and certifications from the Insurance Department or regulatory authority of the company's state of domicile. Facsimiles and photocopies are not acceptable.

- \_\_\_ 1. Name Application (no fee required)
- \_\_\_ 2. Revised Disclosure Statement reflecting the new name
- \_\_\_ 3. Application for Certificate of Authority (CCRC Forms 1 & 2)
- \_\_\_ 4. Amended Articles of Incorporation **certified** by the Secretary of State.
- \_\_\_ 5. Original Texas Certificate of Authority must be surrendered.
- \_\_\_ 6. Amendments must be received for the following:
  - (a) Escrow Accounts and/or
  - (b) Reserve Loan Accounts

**INCOMPLETE APPLICATIONS IMPEDE TIMELY REVIEW BY THE DEPARTMENT; THEREFORE, IT IS EXTREMELY IMPORTANT THAT APPLICATIONS ARE COMPLETE. SUBMIT A COMPLETE FILING TO THE TEXAS DEPARTMENT OF INSURANCE, COMPANY LICENSING & REGISTRATION DIVISION, MC 305-2C, P. O. BOX 149104, AUSTIN, TX 78714-9104. FOR QUESTIONS OR MORE INFORMATION, CALL (512) 322-4370.**

THESE GUIDELINES ARE GENERAL IN NATURE AND DO NOT SUPERCEDE STATUTE OR REGULATION. THEY ARE NOT INTENDED TO BE ALL INCLUSIVE AND ADDITIONAL DOCUMENTATION MAY BE REQUESTED.