

F17000000 781

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

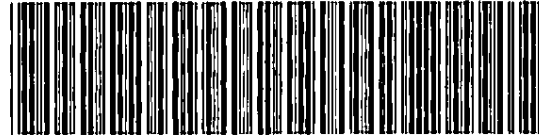
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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2021 JAN 27 P 4:40

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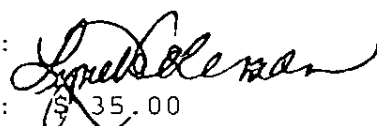
CORPORATION SERVICE COMPANY  
1201 Hays Street  
Tallahassee, FL 32301  
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 635865 7113721

AUTHORIZATION :

COST LIMIT : \$ 35.00



ORDER DATE : January 26, 2021

ORDER TIME : 10:47 AM

ORDER NO. : 635865-010

CUSTOMER NO: 7113721

FOREIGN FILINGS

NAME: SUNTRUST ADVISORY SERVICES,  
INC.

XX CORPORATE  
       LIMITED PARTNERSHIP  
       LIMITED LIABILITY COMPANY

XXXX AMENDMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

       CERTIFIED COPY  
XX        PLAIN STAMPED COPY  
       CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Eyliena Baker -- EXT# 61594

EXAMINER: \_\_\_\_\_

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: SunTrust Advisory Services, Inc.

Name of Corporation

DOCUMENT NUMBER: F17000000781

The enclosed Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Hasana Stanberry

Name of Contact Person

Truist Bank

Firm/Company

303 Peachtree Street, NE

Address

Atlanta, Georgia 30308

City/State and Zip Code

hasana.stanberry@truist.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Hasana Stanberry

Name of Contact Person

at ( 404 ) 813-6735

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- |  |   |  |   |
|--|---|--|---|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee & Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee & Certified Copy | <input type="checkbox"/> \$52.50 Filing Fee, Certificate of Status & Certified Copy |
|--|---|--|---|

**Mailing Address:**

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**

Amendment Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**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)**

F17000000781

\_\_\_\_\_  
(Document number of corporation (if known))

1. SunTrust Advisory Services, Inc.

\_\_\_\_\_  
(Name of corporation as it appears on the records of the Department of State)

2. DELAWARE

\_\_\_\_\_  
(Incorporated under laws of)

3. 02/17/2017

\_\_\_\_\_  
(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? 12/14/2020

5. Truist Advisory Services, Inc.

\_\_\_\_\_  
(Name of corporation after the amendment, adding suffix "corporation," "company," or "incorporated," or appropriate abbreviation, if not contained in new name of the corporation)

\_\_\_\_\_  
(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.

\_\_\_\_\_  
(New duration)

7. If the amendment changes the jurisdiction of incorporation, indicate new jurisdiction.

\_\_\_\_\_  
(New jurisdiction)

8. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

9. If the amendment changes person, title or capacity in accordance with 607.1504 (4), indicate that change:

FILED


2021 JAN 27 P 4:40

FILED



<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove

Attached is a certificate or document of similar import, evidencing the amendment, authenticated not more than 90 days prior to delivery of the application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the laws of which it is incorporated.

  
 \_\_\_\_\_  
 (Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)

Hasana  
 Stanberry  
Digitally signed by  
 Hasana Stanberry  
 Date: 2021.01.12 20:29:38  
 -05'00'

Hasana Stanberry  
 \_\_\_\_\_  
 (Typed or printed name of person signing)

Assistant Vice President  
 \_\_\_\_\_  
 (Title of person signing)

**FILING FEE \$35.00**

# Delaware


Page 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THAT THE SAID "SUNTRUST ADVISORY SERVICES, INC.", FILED A CERTIFICATE OF AMENDMENT, CHANGING ITS NAME TO "TRUIST ADVISORY SERVICES, INC." ON THE FOURTEENTH DAY OF DECEMBER, A.D. 2020, AT 8:02 O'CLOCK A.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID CORPORATION IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE NOT HAVING BEEN CANCELLED OR DISSOLVED SO FAR AS THE RECORDS OF THIS OFFICE SHOW AND IS DULY AUTHORIZED TO TRANSACT BUSINESS.



  
Jeffrey W. Bullock, Secretary of State

5928774 8320  
SR# 20210228615

Authentication: 202371941  
Date: 01-26-21

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

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Name of Corporation

DOCUMENT NUMBER: **F1700000781**

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