

2007 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED

07 MAR 30 PM 3:07

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # M01000001219 1. Entity Name FRANKLIN TEMPLETON SERVICES, LLC					
Principal Place of Business ONE FRANKLIN PKWY. SAN MATEO, CA 94403-1906			Mailing Address ONE FRANKLIN PKWY. LEGAL SM 920/2 SAN MATEO, CA 94403-1906		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 94-3384969	
5. Certificate of Status Desired ☐				\$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent SEIDMAN, LAURA R 500 E. BROWARD BLVD., STE. 2100 FT LAUDERDALE, FL 33394-3091			7. Name and Address of New Registered Agent Name CT Corporation System Street Address (P.O. Box Number is Not Acceptable) 1200 South Pine Island Road City Plantation FL Zip Code 33324		
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE <u><i>Jennifer Quinn</i></u> Jennifer Quinn Assistant Secretary <u>3/26/07</u> DATE					
FILE NOW!!! FEE IS \$200.00			Make check payable to: Florida Department of State		
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM TEMPLETON WORLDWIDE, INC. 500 EAST BROWARD BLVD, SUITE 2100 FORT LAUDERDALE, FL 33394	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition 300095918243 04/05/07--01056--023 **200.00	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition		
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition		
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.					
SIGNATURE: <u><i>Barbara J. Green</i></u> Barbara J. Green			March <u>22</u> , 2007 650.525.7188		

REINSTATEMENT 2006-2007