P170000 26207

(R	Requestor's Name)	
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PICK-UP	☐ WAIT	MAIL
(B	Business Entity Nar	me)
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: Lombard Internation	onal Brokers Inc.		
DOCUMENT NUMB	ER: P17000026207			
	f Amendment and fee are su	abmitted for filing.		
Please return all corresp	nondence concerning this ma	itter to the following:		
,	Allison Corrado			
<u>-</u>	Name of Contact Person			
I	Lombard International			
		Firm/ Company		
1	650 Market St., 54th Fl			
_	Address			
1	Philadelphia, PA 19103			
-		City/ State and Zip Code		
corpor	atecompliance@lombardinte	rnational.com		
		sed for future annual report	notification)	
For further information	concerning this matter, pleas	se call:		
Allison Corrado		at (⁴⁸⁴	530-4805 de & Daytime Telephone Number	
Name o	f Contact Person	Area Coo	le & Daytime Telephone Number	
Enclosed is a check for	the following amount made	payable to the Florida Depa	rtment of State:	
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	■\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Address Amendment Section Division of Corporations		Amenda Division	Address ment Section n of Corporations	
P.O. Box 6327 Tallahassee, FL 32314		Clifton Building 2661 Executive Center Circle		

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Lombard International Brokers Inc.

Lomoard international brokers inc.	
(Name of Corporation as of	currently filed with the Florida Dept. of State)
P17000026207	
(Document No	umber of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutits Articles of Incorporation:	stes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corpora	ition:
	
	The new rporation," "company," or "incorporated" or the abbreviation c," or "Co". A professional corporation name must contain the viation "P.A."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS	
(1 metput byfice dutiess store m. 2 STREET 212DRESS	
	· DEC
	1
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
(maining address MAT DE A TOST OF FICE BOX)	
	: . 50
D. If amending the registered agent and/or registered off new registered agent and/or the new registered office	
Name of New Registered Agent	
(FI	lorida street address)
New Registered Office Address:	. Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am for	d Agent: amiliar with and accept the obligations of the position.
Signature o	of New Registered Agent, if changing

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held, President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>14</u>	ohn Doe	
X Remove	<u>V</u> <u>N</u>	like Jones	
X Add	<u>sv</u> <u>s</u>	ially Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) _x Change	D	Kenneth P. Kilbane	One Liberty Place
Add			1650 Market St., 54th Fl.
Remove			Philadelphia PA 19103
2)x Change	D	Joseph A. Fillip, Jr.	One Liberty Place
Add			1650 Market St., 54th Fl.
Remove			Philadelphia PA 19103
3) Change	PD	John T. Fischer	One Liberty Place
<u>x</u> Add			1650 Market St., 54th Fl.
Remove			Philadelphia PA 19103
4) Change	<u> </u>	John F. Reilly	One Liberty Place
<u>x</u> Add			1650 Market St., 54th Fl.
Remove			Philadelphia PA 19103
5) Change	DT	Michelle J. Ross	One Liberty Place
x Add			1650 Market St., 54th Fl.
Remove			Philadelphia PA 19103
6) Change			
Add			
Remove			

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
	
-	***************************************
	
	Notice of the second shares
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
(if not applicable, indicate N/A)	

	n:	, if other than the
late this document was signed.		
Effective date if applicable:	(no more than 90 days after amendment file date)	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block d locument's effective date on the Departme	oes not meet the applicable statutory filing requirements, this cent of State's records.	date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were adopted b by the shareholders was/were sufficien	y the shareholders. The number of votes cast for the amendment t for approval.	(s)
	by the shareholders through voting groups. The following staten voting group entitled to vote separately on the amendment(s):	ieni
"The number of votes east for the	amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/were adopted b action was not required.	y the board of directors without shareholder action and sharehold	ler
☐ The amendment(s) was/were adopted b action was not required.	y the incorporators without shareholder action and shareholder	
	9	
Signature	ouch sung of	
(By a director	, president or other officer – if directors or officers have not beer	
	n incorporator – if in the hands of a receiver, trustee, or other couciary by that fiduciary)	irt
į	oseph A. Fillip, Jr.	
	Oseph A. Fillip, Jr. (Typed or printed name of person signing)	
1	Executive Vice President - Global Tax & Legislative Al	ffairs
	(Title of person signing)	