

N10000003087

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

(Business Entity Name)

(Document Number)

Certified Copies  Certificates of Status

Special Instructions to Filing Officer:  
  
D

Office Use Only



400184010304

08/30/10--01060--010 \*\*43.75

FILED  
2010 AUG 30 AM 11:33  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Amend

TB SEP - 1 2010

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**NAME OF CORPORATION:** Raymond James Employee Charity Fund, Inc.

**DOCUMENT NUMBER:** N10000003087

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Paul L. Matecki  
(Name of Contact Person)

Raymond James Financial, Inc.  
(Firm/ Company)

880 Carillon Parkway  
(Address)

St. Petersburg, FL 33716  
(City/ State and Zip Code)

paul.matecki@raymondjames.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Susan L. Walzer at ( 727 ) 567-3526  
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

- |  |   |   |  |
|--|---|---|--|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee & Certificate of Status | <input checked="" type="checkbox"/> \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | <input type="checkbox"/> \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) |
|--|---|---|--|

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

**Street Address**  
Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

# RAYMOND JAMES

August 27, 2010

*Via Overnight Mail*

Amendment Section  
Florida Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

*Re: Raymond James Employee Charity Fund, Inc.  
Document Number: N10000003087*

Ladies and Gentlemen:

Enclosed please find the form Cover Letter, our check in the amount of \$43.75, and the original and one copy of the Articles of Amendment to Articles of Incorporation for the referenced not-for-profit corporation. Also enclosed is a UPS overnight envelope for your use in returning the Certified Copy to me in an expedited manner.

Thank you for your assistance. Should you have any questions, please contact me at the telephone number below.

Sincerely,



Deborah A. Hawke  
Executive Assistant to Paul L. Matecki  
General Counsel

Enclosures

**RAYMOND JAMES**  
FINANCIAL, INC.

RAYMOND JAMES FINANCIAL CENTER LEGAL DEPARTMENT  
880 Carillon Parkway St. Petersburg, Florida 33716

Writer's Direct Dial: 727.567.5185 Fax: 866.208.0522 E-mail: [Debbie.Hawke@RaymondJames.com](mailto:Debbie.Hawke@RaymondJames.com)

Articles of Amendment  
to  
Articles of Incorporation  
of

Raymond James Employee Charity Fund, Inc.

(Name of Corporation as currently filed with the Florida Dept. of State)

N1000003087

(Document Number of Corporation (if known))

FILED  
2010 AUG 30 AM 11:33  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

**A. If amending name, enter the new name of the corporation:**

*The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or " Inc." "Company" or "Co." may not be used in the name.*

**B. Enter new principal office address, if applicable:**  
(Principal office address MUST BE A STREET ADDRESS)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**C. Enter new mailing address, if applicable:**  
(Mailing address MAY BE A POST OFFICE BOX)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:**

Name of New Registered Agent: \_\_\_\_\_

New Registered Office Address: \_\_\_\_\_  
(Florida street address)

\_\_\_\_\_, Florida  
(City) (Zip Code)

**New Registered Agent's Signature, if changing Registered Agent:**

*I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.*

\_\_\_\_\_  
*Signature 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)*

<u>Title</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

**E. If amending or adding additional Articles, enter change(s) here:**

*(attach additional sheets, if necessary). (Be specific)*

( Adding:)

**Article IX - Dissolution**

Upon the dissolution of the organization, assets shall be distributed for one or more exempt purposes within the meaning of Section 501(c)(3) of the Internal Revenue Code, or corresponding section of any future federal tax code, or shall be distributed to the federal government, or to a state or local government, for a public purpose. Any such assets not disposed of shall be disposed of by the Court of Common Pleas of the county in which the principal office of the organization is then located, exclusively for such purposes or to such organization or organizations, as said Court shall determine, which are organized and operated exclusively for such purposes.

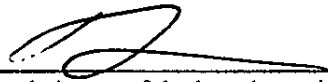
The date of each amendment(s) adoption: August 24, 2010  
(date of adoption is required)

Effective date if applicable: \_\_\_\_\_  
(no more than 90 days after amendment file date)

**Adoption of Amendment(s) (CHECK ONE)**

- The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.
- There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.

Dated August 27, 2010

Signature \_\_\_\_\_ 

(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

Paul L. Matecki  
(Typed or printed name of person signing)

Director  
(Title of person signing)