

444750

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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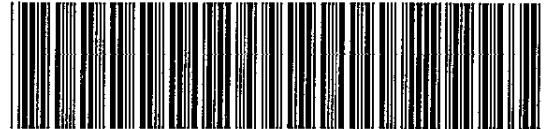
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
ALLAHABAD, FLORIDA

02 DEC -9 PM 1:44

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444750 CM
REC'D 12-9-02
391

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Raymond James Financial, Inc.
(Name of Corporation)

DOCUMENT NUMBER: _____

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing. Please return all correspondence concerning this matter to the following:

Michelle Rowbottom
(Name of person)

Raymond James Financial, Inc. – Legal Department
(Name of firm/company)

P. O. Box 12749
(Address)

St. Petersburg, FL 33733-2749
(City/state and zip code)

For further information concerning this matter, please call:

Michelle Rowbottom at (727) 567-5189
(Name of person) (Area code & daytime telephone number)

Enclosed is a \$35.00 check made payable to the Department of State.

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

Street Address:
Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

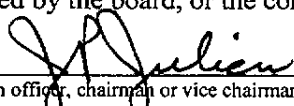
**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR
BOTH FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Raymond James Financial, Inc.
2. The principal office address: 880 Carillon Parkway, P. O. Box 12749,
St. Petersburg, FL 33716
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 01/24/1974 Document number: 444750
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
Lynn Pippenger
880 Carillon Parkway
St. Petersburg, FL 33716
6. The name and street address of the new registered agent (if changed and/or registered office (if changed):
Paul L. Matecki
880 Carillon Parkway
St. Petersburg, FL 33716

The street address of its registered office and the street address of the business office of registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.


(Signature of an officer, chairman or vice chairman of the board)

Jeffrey P. Julien, Senior Vice President
(Printed or typed name and title)

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.


(Signature of Registered Agent)

(Date)

If signing on behalf of an entity:

Paul L. Matecki
(Typed or Printed Name)

(Capacity)

*** * FILING FEE: \$35.00 * * ***

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE AND MAIL TO:
DIVISION OF CORPORATIONS, P. O. BOX 6327, TALLAHASSEE, FL 32314

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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