

822801

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

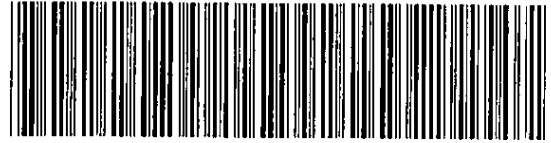
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer

Office Use Only



000431201040

W24-97545

NICy Amend

RECEIVED

2024 JUN 28 PM 3:34

DEPARTMENT OF STATE  
TALLAHASSEE, FL 32304

FILED

2024 JUN 28 AM 8:44

DEPARTMENT OF STATE  
TALLAHASSEE, FL 32304

A. RAMSEY

JUL 12 2024

\* 02250, 00524, 00671

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

ACCOUNT NO. : I20000000195

REFERENCE : 474211 4730518

AUTHORIZATION :

COST LIMIT

*Liquid America*  
\$ 35.00

-----  
ORDER DATE : May 21, 2024

ORDER TIME : 1:41 PM

ORDER NO. : 474211-080

CUSTOMER NO: 4730518  
-----

FOREIGN FILINGS

NAME: LINCOLN FINANCIAL ADVISORS  
CORPORATION

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: Shauna Godbolt -- EXT#

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

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Lincoln Financial Advisors Corporation

Name of Corporation

DOCUMENT NUMBER: 822801

The enclosed Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Melissa Kostrzewski

Name of Contact Person

Corporation Service Company

Firm/Company

251 Little Falls Drive

Address

Wilmington, DE 19808

City/State and Zip Code

aaren.hespenheide@osaic.com

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

For further information concerning this matter, please call:

Aaren Hespenheide

Name of Contact Person

at ( 480 ) 761-4345

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- \$35 Filing Fee       \$43.75 Filing Fee & Certificate of Status       \$43.75 Filing Fee & Certified Copy       \$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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

July 1, 2024

CORPORATION SERVICE COMPANY

TALLAHASSEE, FL 32301

SUBJECT: LINCOLN FINANCIAL ADVISORS CORPORATION  
Ref. Number: 822801

**RESUBMIT**  
Please give original  
submission date as file date.

We have received your document for LINCOLN FINANCIAL ADVISORS CORPORATION and the authorization to debit your account in the amount of \$. However, the document has not been filed and is being returned for the following:

Please include a certified copy from Indiana showing the name change. Please move the new name to line number 5 and put the date that the name was changed in Indiana on line number 4 (the date on line number 4 must match the date on the certificate from Indiana).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Annette Ramsey  
OPS

Letter Number: 624A00014306

**RECEIVED**  
2024 JUL 11 AM 11:17  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**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.)

**FILED**  
2024 JUN 28 AM 8:44  
TALLAHASSEE FLORIDA

**SECTION I**  
**(1-3 MUST BE COMPLETED)**

822801  
\_\_\_\_\_  
(Document number of corporation (if known))

1. Lincoln Financial Advisors Corporation  
\_\_\_\_\_  
(Name of corporation as it appears on the records of the Department of State)

2. Indiana 3. 05/14/1969  
\_\_\_\_\_  
(Incorporated under laws of) (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? 06-06-24

5. Osaic FA, 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:

Yes, see below.

\_\_\_\_\_

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
<u>Secretary</u>	<u>Claire Hanna</u>	<u>150 North Radnor Chester Rd, Radnor, PA 19087</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
<u>Director/ President</u>	<u>David Berkowitz</u>	<u>2005 Market Street, One Commerce Square, Philadelphia, PA 19103</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
<u>Treasurer</u>	<u>Adam Cohen</u>	<u>1301 South Harrison Street, Fort Wayne, IN 46802</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
<u>Assistant Secretary</u>	<u>Holley Meyer</u>	<u>150 North Radnor Chester Rd, Radnor, PA 19087</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
<u>Director</u>	<u>Marion Halliday</u>	<u>1301 South Harrison Street, Fort Wayne, IN 46802</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove

10. 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)

Abby Henig

(Typed or printed name of person signing)

Assistant Secretary

(Title of person signing)

FILING FEE \$35.00

474211-80

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
<u>Secretary</u>	<u>Nina McKenna</u>	<u>18700 N Hayden Rd., STE 255, Scottsdale, AZ 85255</u>	<input checked="" type="checkbox"/> Add  <input type="checkbox"/> Remove
<u>Director/ President</u>	<u>John DiMonda</u>	<u>18700 N Hayden Rd., STE 255, Scottsdale, AZ 85255</u>	<input checked="" type="checkbox"/> Add  <input type="checkbox"/> Remove
<u>Treasurer</u>	<u>David Schmidt</u>	<u>18700 N Hayden Rd., STE 255, Scottsdale, AZ 85255</u>	<input checked="" type="checkbox"/> Add  <input type="checkbox"/> Remove
<u>Assistant Secretary</u>	<u>Abby Henig</u>	<u>18700 N Hayden Rd., STE 255, Scottsdale, AZ 85255</u>	<input checked="" type="checkbox"/> Add  <input type="checkbox"/> Remove
<u>Director</u>	<u>Greg Cornick</u>	<u>18700 N Hayden Rd., STE 255, Scottsdale, AZ 85255</u>	<input checked="" type="checkbox"/> Add  <input type="checkbox"/> Remove

10. 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)

Abby Henig

(Typed or printed name of person signing)

Assistant Secretary

(Title of person signing)

**FILING FEE \$35.00**

**Osaic FA, Inc. (f/k/a Lincoln Financial Advisors Corporation)**

<b>Name</b>	<b>Title</b>
John DiMonda	Director
Greg Cornick	Director
Matthew Schlueter	Director
John DiMonda	President, Chief Executive Officer
Greg Cornick	Executive Vice President
Matthew Schlueter	Executive Vice President
Edward Walters	Senior Vice President
Claude Campbell	Assistant Vice President, AML Officer
Timothy Bonisteel	Assistant Vice President, Chief Compliance Officer
David Schmidt	Treasurer
Marion Stark Haliday	Vice President, Chief Risk Officer
Jeffrey Sheftic	Vice President, Chief Operations Officer
Joseph Gallo	Vice President, General Counsel
Nina McKenna	Secretary
Abby Henig	Assistant Secretary



AS OF 6/10/2024

**Address**

18700 N Hayden Rd., Ste. 255, Scottsdale, AZ 85255  
18700 N Hayden Rd., Ste. 255, Scottsdale, AZ 85255  
2300 Windy Ridge Parkway, Suite 750, Atlanta GA 30339

18700 N Hayden Rd., Ste. 255, Scottsdale, AZ 85255  
18700 N Hayden Rd., Ste. 255, Scottsdale, AZ 85255  
2300 Windy Ridge Parkway, Suite 750, Atlanta GA 30339  
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18700 N Hayden Rd., Ste. 255, Scottsdale, AZ 85255  
18700 N Hayden Rd., Ste. 255, Scottsdale, AZ 85255  
10 Exchange Place, Suite 1410, Jersey City, NJ 07302

**State of Indiana  
Office of the Secretary of State**

CERTIFICATE OF EXISTENCE

To Whom These Presents Come, Greeting:

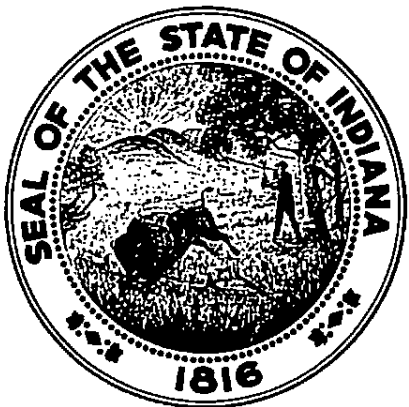
I, DIEGO MORALES, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records and the proper official to execute this certificate.

I further certify that records of this office disclose that

**OSAIC FA, INC.**

duly filed the requisite documents to commence business activities under the laws of the State of Indiana on October 08, 1968, and was in existence or authorized to transact business in the State of Indiana on June 11, 2024.

I further certify this Domestic For-Profit Corporation has filed its most recent report required by Indiana law with the Secretary of State, or is not yet required to file such report, and that no notice of withdrawal, dissolution, or expiration has been filed or taken place. All fees, taxes, interest, and penalties owed to Indiana by the domestic or foreign entity and collected by the Secretary of State have been paid.



In Witness Whereof, I have caused to be affixed my signature and the seal of the State of Indiana, at the City of Indianapolis, June 11, 2024

*Diego Morales*

DIEGO MORALES  
SECRETARY OF STATE

196810-115 / 20243816436

All certificates should be validated here: <https://bsd.sos.in.gov/ValidateCertificate>

Expires on July 11, 2024.

**State of Indiana**  
**Office of the Secretary of State**

**Certified Copies**

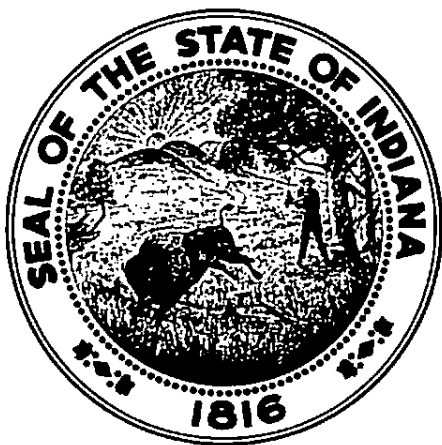
To Whom These Presents Come, Greeting:

I, DIEGO MORALES, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records and the proper official to execute this certificate.

I further certify that this is a true and complete copy of this 3 page document consisting of the following records filed in this office:

Certification Date: June 11, 2024  
Business Name: OSAIC FA, INC.  
Business ID: 196810-115

Transaction	Date Filed	No. of pages
Articles of Amendment	06/06/2024	3
	<b>Total No. of pages</b>	<b>3</b>



In Witness Whereof, I have caused to be affixed my signature and the seal of the State of Indiana, at the City of Indianapolis, June 11, 2024

*Diego Morales*

DIEGO MORALES  
SECRETARY OF STATE

196810-115 / 16764846

All certificates should be validated here: <https://bsd.sos.in.gov/ValidateCertificate>

Expires on July 11, 2024.

**State of Indiana  
Office of the Secretary of State**

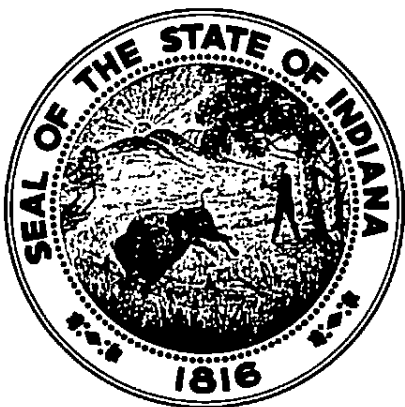
Certificate of Amendment  
of  
**LINCOLN FINANCIAL ADVISORS CORPORATION**

I, DIEGO MORALES, Secretary of State, hereby certify that Articles of Amendment of the above Domestic For-Profit Corporation have been presented to me at my office, accompanied by the fees prescribed by law and that the documentation presented conforms to law as prescribed by the provisions of the Indiana Code.

The name following said transaction will be:

**OSAIC FA, INC.**

NOW, THEREFORE, with this document I certify that said transaction will become effective Thursday, June 06, 2024.



In Witness Whereof, I have caused to be affixed my signature and the seal of the State of Indiana, at the City of Indianapolis, June 06, 2024

*Diego Morales*

DIEGO MORALES  
SECRETARY OF STATE

196810-115 / 10364734

To ensure the certificate's validity, go to <https://bsd.sos.in.gov/PublicBusinessSearch>

APPROVED AND FILED  
DIEGO MORALES  
INDIANA SECRETARY OF STATE  
06/06/2024 10:48 AM

**ARTICLES OF AMENDMENT**

**ARTICLE I - NAME AND PRINCIPAL OFFICE ADDRESS**

BUSINESS ID	196810-115
BUSINESS TYPE	Domestic For-Profit Corporation
BUSINESS NAME	LINCOLN FINANCIAL ADVISORS CORPORATION
PRINCIPAL OFFICE ADDRESS	1301 SOUTH HARRISON STREET, FORT WAYNE, IN, 46802, USA
DATE AMENDMENT WAS ADOPTED	06/06/2024

**EFFECTIVE DATE**

EFFECTIVE DATE	06/06/2024
EFFECTIVE TIME	08:28AM

**ARTICLE I - BUSINESS NAME CHANGE**

DATE OF ADOPTION	06/06/2024
NEW BUSINESS NAME	OSAIC FA, INC.

APPROVED AND FILED  
DIEGO MORALES  
INDIANA SECRETARY OF STATE  
06/06/2024 10:48 AM

**SIGNATURE**

THE MANNER OF THE ADOPTION OF THE ARTICLES OF BUSINESS AMENDMENT AND THE VOTE BY WHICH THEY WERE ADOPTED CONSTITUTE FULL LEGAL COMPLIANCE WITH THE PROVISIONS OF THE ACT, THE ARTICLES OF INCORPORATION, AND THE BYLAWS OF THE CORPORATION.

THE UNDERSIGNED OFFICER OF THIS CORPORATION EXISTING PURSUANT TO THE PROVISIONS OF THE INDIANA BUSINESS CORPORATION LAW DESIRES TO GIVE NOTICE OF CORPORATE ACTION EFFECTUATING BUSINESS AMENDMENT OF CERTAIN PROVISIONS OF ITS ARTICLES OF INCORPORATION.

IN WITNESS WHEREOF, THE UNDERSIGNED HEREBY VERIFIES, SUBJECT TO THE PENALTIES OF PERJURY, THAT THE STATEMENTS CONTAINED HEREIN ARE TRUE. THIS DAY **June 6, 2024**.

THE UNDERSIGNED ACKNOWLEDGES THAT A PERSON COMMITS A CLASS A MISDEMEANOR BY SIGNING A DOCUMENT THAT THE PERSON KNOWS IS FALSE IN A MATERIAL RESPECT WITH THE INTENT THAT THE DOCUMENT BE DELIVERED TO THE SECRETARY OF STATE FOR FILING.

**SIGNATURE**

Abby Henig

**TITLE**

Assistant Secretary

Business ID : 196810-115

Filing No. : 10364734