F0700003080

| (Re | equestor's Name) | |
|-------------------------|--------------------|-----------------|
| (Ad | Idress) | |
| · | · | |
| (Ad | ldress) | |
| (Cit | ty/State/Zip/Phone |) #) |
| | | |
| PICK-UP | ☐ WAIT | MAIL |
| | | |
| (Bu | isiness Entity Nam | ne) |
| | | |
| (Do | ocument Number) | • |
| | | |
| Certified Copies | _ Certificates | of Status |
| | | |
| Special Instructions to | Filing Officer: | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | ļ |
| | | |

Office Use Only



400104442934

06/18/07--01040--012 **70.00

SECRETARY OF STATE

AND FILED

COVER LETTER

| TO: | New Filing Division of | Section Corporations | | | |
|---------|---|---|---------------|---|--|
| SUBJ | ECT: Old | l Mutual Financia | l Netwo | rk Securities, I | nc. |
| 5025 | | (Name of | corporation | - must include suffix |) |
| Dear S | ir or Madam: | | | | |
| "Certif | | | | | act Business in Florida," enced foreign corporation to |
| Please | return all cor | respondence concerning | this matter t | o the following: | |
| Ann | e Richard | dson | | | |
| | | | (Name of I | Person) | |
| NRS | 3 | | | | |
| | | | (Firm/Com | pany) | |
| PO E | 30x 7 1, 3 | 23A Main St. | | | |
| | | | (Addre | ss) | |
| Lake | eville, CT | 06039 | | | |
| | | (1 | City/State ar | nd Zip code) | |
| For fu | rther informat | tion concerning this matt | er, please ca | II: | |
| Anne | e Richard | son at | (860 | , 435-2541x18 | 383 |
| | (Name of P | | | ode & Daytime Telep | hone Number) |
| | New Filing Division of Clifton Buil | Corporations Iding tive Center Circle | | MAILING AND New Filing Straight Division of Control P.O. Box 63: Tallahassee, | Section Corporations 27 |
| Enclos | sed is a check | for the following amoun | t: | | |
| | .00 Filing Fee | | e & 🔲 : | \$78.75 Filing Fee & Certified Copy | \$87.50 Filing Fee, Certificate of Status & Certified Copy |

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

| 1. Old Mutual Financial Network Securities, Inc. | | | | | | |
|--|---------------------|--|---|-------------|--------------|----------|
| | | orporation; must include "INCORPORATED," rp," "Inc," "Co," or "Corp.") | "COMPANY," "CORPORATION," | | _ | |
| | n/a | | | | _ | |
| | (If name unavaila | ble in Florida, enter alternate corporate name ad | lopted for the purpose of transacting business in | Florida |) | |
| 2. | Maryland | 3. | 52-1387769 | | | |
| | (State or country u | inder the law of which it is incorporated) | (FEI number, if applicable) | | _ | |
| 4. | 03/22/1985 | 5. p | perpetual | | | |
| • | | | Duration: Year corp. will cease to exist or "per | rpetual") | _ | |
| 6. | n/a | | | | | |
| (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) | | | | | | |
| 7. | 1117 Perim | neter Center West,Ste E 212, | | | _ | |
| | | (Principal office addres | ss) | | | |
| | 1001 Fleet | Street, 6th floor, Baltimore, M | 1D 21202 | | _ | |
| | | (Current mailing address | ss) | | | |
| 8. | insurance | sales | | | _ | |
| | (Purpose(s) | of corporation authorized in home state or cour | ntry to be carried out in state of Florida) | | | |
| 9. | Name and street | address of Florida registered agent: (P.O. | Box NOT acceptable) | TAEC SEC | 07 J | |
| | Name: | Corporation Service Compar | <u>ny</u> | 到 | | <u> </u> |
| O | ffice Address: | 1201 Hays St. | | SEL SEL | co | |
| | | Tallahassee | , Florida 32301 | [일 [일] | PH 2: | Ë |
| | | (City) | (Zip code) | | 223 | |
| 10 |) Registered ag | ent's accentance | • | - | 1 %.1 | |

10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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 obligations of my position as registered agent.

(Registered agent's signature)

Jacqueline N. Casper Assistant VP
11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

| 12. Names | and business addresses of officers and/or directors: | O7 JUN SECHE TALLAH |
|-----------------|---|---------------------------|
| A. DIREC | CTORS | FILED HASSEE |
| Chairman: | Bruce G. Parker, Jr. | |
| Address: _ | 1117 Perimeter Center West Ste E 212 | FLON 1 |
| • | Atlanta, GA 30338 | NIDA 22 |
| Vice Chairn | nan: None | |
| Address: | | |
| Director: _ | Patrick D. Ferrer, VP VA Distr/Dir. | |
| Address: _ | 1117 Perimeter Center West Ste E 212 | |
| _ | Atlanta, GA 30338 | |
| Director: _ | Richard C. Pretty VP Mktg./Dir. | |
| Address: _ | 1117 Perimeter Center West, Ste E212 | |
| | Atlanta, GA 30338 | |
| B. OFFIC | ERS | |
| President: | Donald B. Johnston | |
| _ | 117 Perimeter Center West,Ste E 212 | |
| | ıtlanta, GA 30338 | |
| Vice Preside | Narciso De Matos Almeida | |
| | 117 Perimeter Center West,Ste E 212 | |
| | utlanta, GA 30338 | |
| Secretary: | Kenneth W. Reitz Also CCO/VP/Dir. | |
| • | 001 Fleet St., 6th fl., Baltimore, MD 21202 | |
| / toui ¢55 | Todd M. Bareika | |
| ricusurer. | 001 Fleet Street, 6th fl., Baltimore, MD 21202 | |
| | necessary, you may attach an addendum to the application listing additional offic | |
| Van | (Signature of Director or Officer listed in number 12 of the application | n) |
| 14. <u>Neni</u> | (Typed or printed name and capacity of person signing application) | |

OLD MUTUAL FINANCIAL NETWORK SECURITIES, INC.

FE#52-1387769 Additional Directors/Officers

Michael J. Buckner, AVP Marketing 1117 Perimeter Center West, Ste # 212 Atlanta, GA 30338

John P. Clifford, Director 1001 Fleet St., 6th fl. Baltimore, MD 21202

Alan M. Harrington, Director, Registered Rep 1117 Perimeter Center West, Ste # 212 Atlanta, GA 30338

97 JUH 18 PM 2: 22

STATE OF MARYLAND Department of Assessments and Taxation

I, PAUL B. ANDERSON OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF THE STATE OF MARYLAND, DO HEREBY CERTIFY THAT THE DEPARTMENT, BY LAWS OF THE STATE, IS THE CUSTODIAN OF THE RECORDS OF THIS STATE RELATING TO THE FORFEITURE OR SUSPENSION OF CORPORATIONS, OR THE RIGHTS OF CORPORATIONS TO TRANSACT BUSINESS IN THIS STATE, AND THAT I AM THE PROPER OFFICER TO EXECUTE THIS CERTIFICATE.

I FURTHER CERTIFY THAT OLD MUTUAL FINANCIAL NETWORK SECURITIES, INC. IS A CORPORATION DULY INCORPORATED AND EXISTING UNDER AND BY VIRTUE OF THE LAWS OF MARYLAND AND THE CORPORATION HAS FILED ALL ANNUAL REPORTS REQUIRED, HAS NO OUTSTANDING LATE FILING PENALTIES ON THOSE REPORTS, AND HAS A RESIDENT AGENT. THEREFORE, THE CORPORATION IS AT THE TIME OF THIS CERTIFICATE IN GOOD STANDING WITH THIS DEPARTMENT AND DULY AUTHORIZED TO EXERCISE ALL THE POWERS RECITED IN ITS CHARTER OR CERTIFICATE OF INCORPORATION, AND TO TRANSACT BUSINESS IN MARYLAND.

IN WITNESS WHEREOF, I HAVE HEREUNTO SUBSCRIBED MY SIGNATURE AND AFFIXED THE SEAL OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF MARYLAND AT BALTIMORE ON THIS MAY 16, 2007.

Paul B. Anderson Charter Division

Paul B. Under

SECRETARY JF STATE TALLAHASSEE, FLORIDA

07 JUN 18 PM 2:



301 West Preston Street, Baltimore, Maryland 21201
Telephone Balto. Metro (410) 767-1340 / Outside Balto. Metro (888) 246-5941
MRS (Maryland Relay Service) (800) 735-2258 TT/Voice
Fax (410) 333-7097