F10000001587

(Requestor's Name)
(Address)
(Address)
, ,
(City/State/Zip/Phone #)
(City/State/Zip/Pflofie #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:



800171976438

03/17/10--01040--009 **78.75

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SECRETARY OF STATE
ALL AHASSEE, FLORID

Office Use Only

W10006 013640

A 4/1/10



RECEIVED

Division of Corporations

March 18, 2010

CHAISTAIL TALLAHL 1 150

CLARENCE EVANS JR. 4151 AMON CARTER BLVD.MD 2450 FORT WORTH, TX 76155

SUBJECT: AMERICAN BEACON ADVISORS, INC.

Ref. Number: W10000013640

We have received your document for AMERICAN BEACON ADVISORS, INC. and your check(s) totaling \$78.75. However, the document has not been filed and is being retained in this office for the following:

The entity's period of duration must be listed on the application. Please insert the word "perpetual", if a specific date of dissolution or term of existence has not been specified.

The entity's date of incorporation /organization must match the date on the certificate of existence on line 4.

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

If you have any questions concerning the filing of your document, please call (850) 245-6062.

Eula Peterson Regulatory Specialist II

Letter Number: 610A00006746



March 30, 2010

VIA FEDERAL EXPRESS

Eula Peterson Regulatory Specialist II Division of Corporation P.O. Box 6327 Tallahassee, FL 32314

Dear Ms Peterson:

Enclosed are the documents and copy of your letter dated March 18, 2010 as requested.

If you have any questions concerning the documents, please call Clarence Evans at (817) 931-5377.

Sincerely,

Ileana Mansfield Administrator

Morfuld

Enclosure

COVER LETTER

TO:	New Filing Section Division of Corporations				
SUBJI	ECT: American Beacon	Advis.	ors, Inc.		
	Name of corp	poration	- must include suffix		
Dear Si	ir or Madam:				
"Certifi	closed "Application by Foreign Corporation of Existence," or "Certificate of Goreferenced foreign corporation to transac	od Stan	ding" and check are sub-		
Please	return all correspondence concerning this	s matter	to the following:		
0	7===== FUTOR 7=				
	Parence Evans ar. N	ame of I	Person		
Am	erican Beacon Advisors, -	Zac. rm/Com	pany		
	Amon Carter Blud., MD				
Fort	: Worth, TX, 76155 City	/State ar	nd Zip code	······································	
Clace	E-mail address: (to b	e used f	or future annual report n	otification)	
For furt	ther information concerning this matter,	please ca	all:		
	at ()		
	Name of Person	Area C	Ode & Daytime Telepho	one Number	
	STREET/COURIED ADDRESS.		MATEURIC AL	DDDFSS.	
STREET/COURIER ADDRESS: New Filing Section			MAILING ADDRESS: New Filing Section		
Division of Corporations			Division of Corporations		
Clifton Building			P.O. Box 6327		
	2661 Executive Center Circle Tallahassee, FL 32301		Tallahassee, F	L 32314	
Enclose	ed is a check for the following amount:				
\$70.	.00 Filing Fee S78.75 Filing Fee & Certificate of State		\$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.

(If namo unava	ilable in Florida, enter alternate corpor	rate name	adopted for the purpose of transacting business in Flor	rida)
Delawar	y under the law of which it is incorpor	3.	75-2145961 (FEI number, if applicable)	·
- November (Dat	c of incorporation)	5.	Perne +va? (Duration: Year corp. will cease to exist or "perpetua	<u>il")</u>
•	• /		, and a second s	,
	(Date first transacted b	meinece in	Florida, if prior to registration)	
	(SEE SECTIONS 607.1501	& 607.15	602. F.S., to determine penalty liability)	
	(SEE SECTIONS 607.1501	& 607.15	02, F.S., to determine penalty liability)	
4151 Am	(SEE SECTIONS 607.1501	& 607.15	02, F.S., to determine penalty liability)	
4151 Am	(SEE SECTIONS 607.1501 Lea Carter Blud, MD 24: (Principal o	& 607.15	02, F.S., to determine penalty liability)	
4151 Am	(SEE SECTIONS 607.1501 LEA Carter Blvd. MD 24: (Principal o	& 607.15 So, For office addr	102, F.S., to determine penalty liability) 12 Worth, TX 76/55 12 ess)	
	(SEE SECTIONS 607.1501 LEA Cacter Blvd. MD 24: (Principal o	& 607.15 So, For office addr	102, F.S., to determine penalty liability) 12 Worth, TX 76/55 12 ess)	
	(SEE SECTIONS 607.1501 LEA Carter Blvd. MD 24: (Principal o	& 607.15 So, For office addr	102, F.S., to determine penalty liability) 12 Worth, TX 76/55 12 ess)	
Same as	(SEE SECTIONS 607.1501 ION Carter Blvd. MD 345 (Principal o	& 607.15 So, Foc office addr	et Worth, TX 76/55 ess)	
Same as	(SEE SECTIONS 607.1501 ION Carter Blvd. MD 345 (Principal o	& 607.15 So, Foc office addr	102, F.S., to determine penalty liability) 12 Worth, TX 76/55 12 ess)	19 445
Sime as Investor (Purpose(s	(SEE SECTIONS 607.1501 ION Carter Blvd. MD 345 (Principal o	& 607.15 So, For office address tiling address tate or cou	ess) control to be carried out in state of Florida)	10 MAR 3
Sime as Trivestr (Purpose(s) Name and street	(SEE SECTIONS 607.1501 LEA Carter Blvd. MD 343 (Principal of Current management Advisor s) of corporation authorized in home standards of Florida registered age	& 607.15 So, For office address illing address tate or count: (P.O.	ess) control to be carried out in state of Florida) Box NOT acceptable)	10 MAR 31
Sime as Investor (Purpose(s	(SEE SECTIONS 607.1501 LEA Carter Blvd. MD 343 (Principal of Current management Advisor s) of corporation authorized in home significant address of Florida registered age CT COPOrable	& 607.15 So, For office address illing address itate or country (P.O.	ess) control of the theory of the transfer of	10 MAR 31 PH
Same as Trucstr (Purpose(s)	(SEE SECTIONS 607.1501 LEA Carter Blvd. MD 343 (Principal of Current management Advisor s) of corporation authorized in home significant address of Florida registered age CT COPOrtific IS78	& 607.15 So, For office address itate or count: (P.O.	ess) antry to be carried out in state of Florida) Box NOT acceptable)	10 MAR 31 PH 3:
Same as True \$4 m (Purpose() Name and street Name:	(SEE SECTIONS 607.1501 LEA Carter Blvd. MD 343 (Principal of Current management Advisor s) of corporation authorized in home significant address of Florida registered age CT COPOrable	& 607.15 So, For office address itate or count: (P.O.	ess) antry to be carried out in state of Florida) Box NOT acceptable)	10 MAR 31 PH 3: 53

(Registered agent's signature)

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.

Michael E. José Assistant Ocors 12. Names and business addresses of officers and/or directors:

A. DIRECTORS
Chairman: William F. Quinn
Address: 4151 Amon Carter Blud., MD2450, Fort Worth, TX 76155
Director Richard P. Schifter
Address: 4151 Amon Carter Blud., MD245, Fort Worth, TX 76155
Director: Kneeland Young blood
Address: 4151 Amon Carter Blud., MD2450, Fort Worth, TX 76155
Director: M. Mark Albert
Address: 415/ Amon Carter Blud., MO2450, Fort Worth, TX 76/55
B. OFFICERS
President: Cene L. Needles, Jr.
Address: 4/51 Amon Carter Blud., MD2450, Fort Worth, TX 76/55
Vice President:
Address:
Secretary: Rosemany K. Behan
Address: 4/5/ Amon Carter Blud., MD2450, Fort Worth, TX 76/55
Treasurer: Melinda G. Heika
Address: 4151 Amon CarterBlud., MD450, Fort Worth, TX 76/55
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.
13. Rollmary K. Behan (Signature of Director or Officer listed in number 12 of the application)
(Signature of Director or Officer listed in number 12 of the application)
14. Rosemary K. Behan, Corporate Secretary (Typed or printed name and capacity of person signing application)
(1 year or printed name and capacity of person signing application)

A. DIRECTORS Chairman: _______ Vice Chairman: Address: _ Director: E. Stanley O'Neal Address: 4151 Amon Carter Blud., MD 2450, Fort Worth, TX 76155 **B. OFFICERS** President: Vice President: ______ Address: NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. (Signature of Director or Officer listed in number 12 of the application) 14. _____ (Typed or printed name and capacity of person signing application)

12. Names and business addresses of officers and/or directors:

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "AMERICAN BEACON ADVISORS, INC." IS

DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS

IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS

THE RECORDS OF THIS OFFICE SHOW, AS OF THE THIRTIETH DAY OF

MARCH, A.D. 2010.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.



2109006 8300

100331532

AUTHENTYCATION: 7901135

DATE: 03-30-10

You may verify this certificate online at corp.delaware.gov/authver.shtml