F16000001252

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M. SOLOMON SEP = 6 2023 CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : I2000000195 REFERENCE : 852625 4730518 AUTHORIZATION : COST LIMIT : (\$ ORDER DATE : July 3, 2023 ORDER TIME : 1:59 PM ORDER NO. : 852625-335 CUSTOMER NO: 4730518 FOREIGN FILINGS NAME: ADVISOR GROUP, INC. 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: Eyliena Baker -- EXT#

EXAMINER:

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.)

SECTION I (1-3 MUST BE COMPLETED)

F16000001258

(Doct	iment number of corporation (if known)	
AG Financial Services FL, Inc		
(Name of corporation	as it appears on the records of the Department of State))
2. MD	3. 03/16/2016 (Date authorized to do business in Florida)	
(Incorporated under laws of)	(Date authorized to do bus	iness in Florida)
	SECTION II ETE ONLY THE APPLICABLE CHANGES)	
4. If the amendment changes the name of the corporat incorporation? 06/21/2023	tion, when was the change effected under the laws of its	jurisdiction of
Saic, Inc.		
	suffix "corporation," "company," or "incorporated," or	
(If new name is unavailable in Florida, enter alterna	ate corporate name adopted for the purpose of transacting	g business in Florida)
6. If the amendment changes the period of duration	on, indicate new period of duration.	<u>න</u>
	(New duration)	
7. If the amendment changes the jurisdiction of in	ncorporation, indicate new jurisdiction.	FH 2: 0
	(New jurisdiction)) C
8. If the amendment changes the jurisdiction of organ	nization, indicate new jurisdiction:	
9. If the amendment changes person, title or capacity i	in accordance with 607.1504 (4), indicate that change:	

Title/ Capacity	Name	<u>Address</u>	Type of Action
			□Add
			□Remove
			□Add
			□Remove
			□Add
		·	□Remove : S
			□Remove
			DAdd
			□Remove
 Attached is a confidence of the application under the laws 	ertificate or document of similar import, evid on to the Department of State, by the Secretar of which it is incorporated.	dencing the amendment, authenticated not y of State or otherofficial having custody o	more than 90 days prior to deliver f corporate records in the jurisdiction
	(Signature of a director	r, president or other officer - if in the hand	s of
Abby Henig	a receiver or other cou	art appointed fiduciary, by that fiduciary) Asst. Secretary	
	Typed or printed name of person signing)	(Title of pers	on signing)

FILING FEE \$35.00

STATE OF MARYLAND Department of Assessments and Taxation

I, MICHAEL L. HIGGS 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 ADVISOR GROUP, INC. FILED ITS ARTICLES OF AMENDMENT ON 06-21-2023 WITH A NAME CHANGE CHANGING ITS NAME TO OSAIC, INC. WITH THIS DEPARTMENT EFFECTIVE 06-21-2023-10:58-AM AND THAT THE CORPORATION IS AT THE TIME OF THIS CERTIFICATE IN GOOD STANDING 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 AUGUST 30, 2023.

Michael L. Higgs Director



301 West Preston Street, Baltimore, Maryland 21201 Telephone Balto. Metro (410) 767-1344 / Outside Balto. Metro (888) 246-5941 MRS (Maryland Relay Service) (800) 735-2258 TT/Voice

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