

718000002717

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

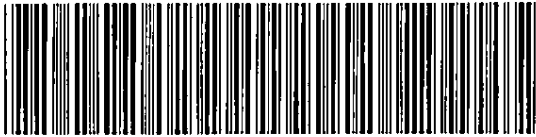
(Document Number)

Certified Copies _____ Certificates of Status _____

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300321191553

RECEIVED
CLERK OF COURT
18 DEC -3 PM 2:04

FILED
18 DEC -3 AM 9:12
TALLAHASSEE, FLORIDA

DEC 18 2018
S. YOUNG

RESUBMIT

Please give original
submission date as file date.



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 4, 2018

COPORATION SERVICE COMPANY
ROXANNE TURNER

SUBJECT: ATRIA WEALTH SOLUTIONS, INC.
Ref. Number: F18000002717

The name of your corporation is not available in Florida. An out-of-state corporation whose name is not available must adopt an alternate corporate name for use in Florida. The alternate corporate name must contain "Incorporated," "Company," "Corporation," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.," Please enter the alternate corporate name in the space provided in number five of the application.

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.

Shelia H Young
Regulatory Specialist II

Letter Number: 818A00024777

RECEIVED
18 DEC 17 PM 1:44
FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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

ACCOUNT NO. : I20000000195
REFERENCE : 510068 4306058
AUTHORIZATION : 
COST LIMIT : \$ 35.00

ORDER DATE : November 30, 2018

ORDER TIME : 12:49 PM

ORDER NO. : 510068-045

CUSTOMER NO: 4306058

FOREIGN FILINGS

NAME: ATRIA WEALTH SOLUTIONS, 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: Roxanne Turner -- EXT# 62969

EXAMINER: _____

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: ATRIA WEALTH SOLUTIONS, INC.

Name of Corporation

DOCUMENT NUMBER: F18000002717

The enclosed Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Douglas J. Ketterer

Name of Contact Person

AWS 3, Inc.

Firm/Company

295 Madison Avenue, Suite 1407

Address

New York, NY 10017

City/State and Zip Code

doug.ketterer@atriawealth.com

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

For further information concerning this matter, please call:

Elizabeth Stehler

585

231-1413

at (_____) _____

Name of Contact Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:



\$35.00 Filing Fee



\$43.75 Filing Fee &
Certificate of Status



\$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed)



\$52.50 Filing Fee,
Certificate of Status &
Certified Copy
(Additional copy is
enclosed)

Mailing Address:

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

Street Address:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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)

F18000002717

(Document number of corporation (if known))

1. Atria Wealth Solutions, Inc.

(Name of corporation as it appears on the records of the Department of State)

2. Delaware

(Incorporated under laws of)

3. June 8, 2018

(Date authorized to do business in Florida)

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TALLAHASSEE, 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? October 1, 2018

5. AWS 3, 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)

AWS 3 (FL), Inc.

(If new name is unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

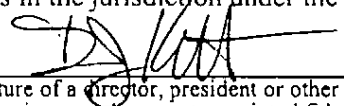
6. If the amendment changes the period of duration, indicate new period of duration.

(New duration)

7. If the amendment changes the jurisdiction of incorporation, indicate new jurisdiction.

(New jurisdiction)

8. 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)

Douglas J. Ketterer

(Typed or printed name of person signing)

Chief Executive Officer

(Title of person signing)

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THAT THE SAID 'ATRIA WEALTH SOLUTIONS, INC.', FILED A CERTIFICATE OF AMENDMENT, CHANGING ITS NAME TO 'AWS 3, INC.' ON THE FIRST DAY OF OCTOBER, A.D. 2018, AT 9:51 O'CLOCK A.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID CORPORATION IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE NOT HAVING BEEN CANCELLED OR DISSOLVED SO FAR AS THE RECORDS OF THIS OFFICE SHOW AND IS DULY AUTHORIZED TO TRANSACT BUSINESS.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "AWS 3, INC." WAS INCORPORATED ON THE TWENTY-SIXTH DAY OF APRIL, A.D. 2017.



A handwritten signature in black ink, reading 'JBullock', is written over a horizontal line. Below the line, the text 'Jeffrey W. Bullock, Secretary of State' is printed.

6392093 8320
SR# 20187907526

Authentication: 204004080
Date: 11-30-18

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