

F18000005747

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

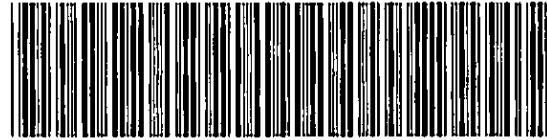
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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18 DEC -3 AM 7:36
ST. JOHN'S COUNTY
TALLAHASSEE, FLORIDA

K. SALY

DEC 14 2018

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Stifel Bank

Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Craig Sherwood

Name of Person

Stifel Financial Corp.

Firm/Company

501 N. Broadway Ave.

Address

St. Louis, MO 63102

City/State and Zip code

corporatetaxaccounting@stifel.com

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

For further information concerning this matter, please call:

Jason Willett

314

342-3799

at (_____) _____

Name of Person

Area Code

Daytime Telephone Number

STREET/COURIER ADDRESS:

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

MAILING ADDRESS:

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

Enclosed is a check for the following amount:

- ☒ \$70.00 Filing Fee ☐ \$78.75 Filing Fee & Certificate of Status ☐ \$78.75 Filing Fee & Certified Copy ☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy

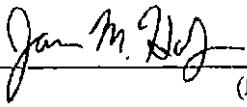
**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT
BUSINESS IN FLORIDA**

*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. Stifel Bank
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")
- (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
2. Missouri 3. 43-1943468
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 03-25-2002 5. _____
(Date of incorporation) (Date of duration, if other than perpetual)
6. _____
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 7074 Edgeworth Dr. Orlando, FL 32819
(Principal office address)
- 501 N. Broadway Ave. St. Louis, MO 63102
(Current mailing address, if different)
8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)
- Name: CT Corporation System
- Office Address: 1200 South Pine Island Rd.
- Plantation, Florida 33324
(City) (Zip code)

9. 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.


James M. Halpin
Assistant Secretary
(Registered agent's signature)

10. 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.

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

A. DIRECTORS

Chairman: James M. Zemlyak

Address: 501 N. Broadway Ave.
St. Louis, MO 63102

Vice Chairman: John Dubinsky

Address: 501 N. Broadway Ave.
St. Louis, MO 63102

Director: H. Meade Summers, III

Address: 501 N. Broadway Ave.
St. Louis, MO 63102

Director: Ben Plotkin

Address: 501 N. Broadway Ave.
St. Louis, MO 63102

B. OFFICERS

President: Larry Kirby

Address: 501 N. Broadway Ave.
St. Louis, MO 63102

Vice President: Brian Leeker

Address: 501 N. Broadway Ave.
St. Louis, MO 63102

Secretary: David Gamache

Address: 501 N. Broadway Ave. St. Louis, MO 63102

Treasurer: Stan Cornish

Address: 501 N. Broadway Ave. St. Louis, MO 63102

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

12. B. J. Leeker
Signature of Director or Officer

The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

13. Brian J. Leeker, CFO
(Typed or printed name and capacity of person signing application)



CERTIFICATE OF CORPORATE GOOD STANDING

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FILED
MISSOURI STATE ARCHIVES

TO ALL TO WHOM THESE PRESENTS SHALL COME:

I, **Lee R. Keith**, Commissioner of Finance (director of the Division of Finance) of the State of Missouri, do hereby certify that the records under my care and custody in my office reveal that

STIFEL BANK

Clayton, Missouri

Charter No. 2872, is a banking corporation in good standing in the State of Missouri.

IN TESTIMONY WHEREOF, I hereunto set my hand and affix the Seal of my office. Done at the City of Jefferson, State of Missouri, on this fourteenth day of November, Two Thousand and Eighteen.



Commissioner