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(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					
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AND
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1919 JAN - 3 PM 1: 15
SECRETARY OF STATE

A al

COVER LETTER

TO: Registration Section Division of Corporations			
Stifel Bank & Trust			
SUBJECT: Name of corporation	- must include suffix		
Dear Sir or Madam:			
The enclosed "Application by Foreign Corporation for A "Certificate of Existence," or "Certificate of Good Standabove referenced foreign corporation to transact business	ling" and check are submitted to register the		
Please return all correspondence concerning this matter Craig Sherwood	to the following:		
- Name of P	erson		
Stifel Financial Corp.			
Firm/Comp	pany		
501 N. Broadway Ave.			
Addres	ss		
St. Louis, MO 63102			
City/State an	d Zip code		
corporatetaxaccounting@stifel.com			
E-mail address: (to be used for	or future annual report notification)		
For further information concerning this matter, please ca	ill:		
Jason Willett 314	ode Daytime Telephone Number		
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	S78.75 Filing Fee &		

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.

I.	rust				
	corporation; must include "INCORPORAT Corp," "Inc," "Co," or "Corp.")	ED," "C	COMPANY," "CORPORATION,"		
(If name unavail	able in Florida, enter alternate corporate na	une ado	nted for the purpose of transacting but	siness in Florida)	
Missouri			-1950333		
2. (State or countr	ry under the law of which it is incorporated	-	(FEI number, if applica	nble)	
04-02-2007					
4. (Date of incorporation)		5	(Date of duration, if other than	narnatual)	
(Date	e of incorporation)		(Date of diffation, if other than	perpetuar)	
6. <u> </u>					
			orida, if prior to registration) F.S., to determine penalty liability)		
4250 (Tab Assa	`	17.1302,	r.s., to determine penalty habitity)		
7	Circle E Sarasota, FL 34243			<u> </u>	
	(Pr	incipal c	office address)		
501 N. Broadwa	y Ave. St. Louis, MO 63102				
	(Current n	nailing a	ddress, if different)	2	
8 Name and stree	et address of Florida registered agent:	(P.O. I:	Sox NOT acceptable)	돌면 로	_ &
	CT Corporation System			- SS - 6	~≓≥%
Name:			_		260
0.00	1200 South Pine Island Rd.			₽ 5 ≇) jj
Office Address:				82 =	_
	Plantation		33324 , Florida	を でいる	
	(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.

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

A. DIRI	ECTORS James M. Zemiyak				
Address:	501 N. Broadway Ave.				
	St. Louis, MO 63102				
Vice Chai					
Address:	501 N. Broadway Ave				
-	St. Louis, MO 63102				
Director:	II. 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. OFFI	CERS	Zan	*		
President:	Christopher Reichert .	CR	<u>F</u>		72:
Address:	501 N. Broadway Ave.	HAS	7-	n P	7
-	St. Louis, MO 63102	SEC.		ES S	2
Vice Presi	John Haffenreffer	FLC	-		רכ
	501 N. Broadway Ave.	NA DE	ā		
-	St. Louis, MO 63102				
Secretary:	Denise Stead				
•	501 N. Broadway Ave. St. Louis, MO 63102				
Treasurer:	John Barringer		-,- ,-		
	501 N. Broadway Ave. St. Louis, MO 63102				
12	f necessary, you may attach an addendum to the application listing additional officers and/or Signature of Director or Officer er or director signing this document (and who is listed in number 11 above) affirms that the fa				
are true ar a third de	and that he or she is aware that false information submitted in a document to the Department of gree felony as provided for in s.817.155, F.S.				
13	(Typed or printed name and capacity of person signing application)	•			



www.flofr.com

January 3, 2019

Mr. Jason Willett 501 N. Broadway Avenue St. Louis, MO 63102

Dear Mr. Willett:

Reference is made to your recent correspondence requesting approval of the above name, which is an FDIC regulated state chartered bank located in St. Louis, MO.

Section 655.922. Florida Statutes, exempts a financial institution, holding company or its subsidiaries from the prohibition of using the word "bank," "banco," "banque," "banker." "banking." "trust company," "savings and loan association." "savings bank." or "credit union." or words of similar import, in any context or in any manner in its corporate name. Therefore, this Office will not object to the use of the above referenced name being registered to transact business in the state of Florida. However, this correspondence is not intended to grant the authority to act in any licensed capacity until all licensing requirements have been met within this state.

Sincerely,

Jeremy W. Smith

Director

Division of Financial Institutions

JWS:trd

cc: Lyn Shoffstall, Chief, Bureau of Commercial Recordings, Division of Corporations, Department of State



CERTIFICATE OF CORPORATE GOOD STANDING

TO ALL TO WHOM THESE PRESENTS SHALL COME:

1, 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 & TRUST _

St. Louis, Missouri

Charter No. 339T, is a trust company 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