

8/27/2021

Division of Corporations
Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
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STATE OF FLORIDA
TALLAHASSEE, FLORIDA

FOREIGN PROFIT/NONPROFIT CORPORATION
Raymond James Trust Company of New Hampshire

Certificate of Status	1
Certified Copy	1
Page Count	05
Estimated Charge	\$87.50

STATE OF FLORIDA
TALLAHASSEE, FL

2021 AUG 27 PM 2:24

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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. Raymond James Trust Company of New Hampshire
(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. New Hampshire 3. 87-2361528
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 8-26/2021 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. 29 Maplewood Avenue, Portsmouth, NH 03801
(Principal office street address)

880 Carillon Parkway, St. Petersburg, FL 33716
(Current mailing address, if different)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: CT Corporation System

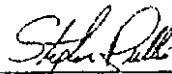
Office Address: 1200 South Pine Island Road

Plantation, , Florida 33324
(City) (Zip code)

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CLERK OF STATE
TALLAHASSEE, FL

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.



(Registered agent's signature)

Stephen Rullis
VP & Asst. Secy.

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. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

A. DIRECTORS

☒ Chairman Name: Joseph G. Weaver
☐ Vice Chairman Address: 880 Carillon Parkway
☒ Director St. Petersburg, FL 33716
☒ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other _____ ☐ Other _____

☐ Chairman Name: Kim Jenson
☐ Vice Chairman Address: 880 Carillon Parkway
☒ Director St. Petersburg, FL 33716
☐ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other _____ ☐ Other _____

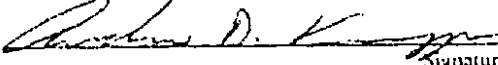
☐ Chairman Name: Ashley MacKendrick
☐ Vice Chairman Address: 880 Carillon Parkway
☐ Director St. Petersburg, FL 33716
☐ President _____
☐ Vice President _____
☐ Secretary ☒ Treasurer
☒ Other CFO ☐ Other _____

☐ Chairman Name: Steven M. Rane
☐ Vice Chairman Address: 710 Carillon Parkway
☒ Director St. Petersburg, FL 33716
☐ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other _____ ☐ Other _____

☐ Chairman Name: Andrew Krempp
☐ Vice Chairman Address: 880 Carillon Parkway
☒ Director St. Petersburg, FL 33716
☐ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☒ Other COO ☐ Other _____

☐ Chairman Name: David Kassenoff
☐ Vice Chairman Address: 880 Carillon Parkway
☒ Director St. Petersburg, FL 33716
☐ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other _____ ☐ Other _____

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

12. 
 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.317.155, F.S.

13. Andrew Krempp, Chief Operating Officer and Director
 (Typed or printed name and capacity of person signing application)

Raymond James Trust Company of New Hampshire

Attachment to Application by Foreign Corporation for Authorization to Transact Business in Florida
Additional Principal Officers

Katrina Berishaj
Secretary
880 Carillon Parkway, St. Petersburg, FL 33716

Philip Snow
Other Officer – Chief Trust Officer
29 Maplewood Avenue, Portsmouth, NH 03801

State of New Hampshire

Department of State

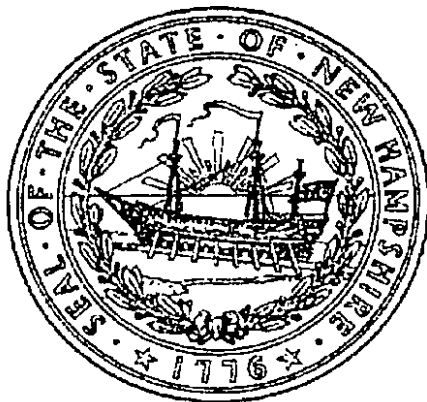
CERTIFICATE

I, William M. Gardner, Secretary of State of the State of New Hampshire, do hereby certify that documents regarding RAYMOND JAMES TRUST COMPANY OF NEW HAMPSHIRE, were filed in this office on August 26, 2021.

INFORMATION REGARDING ANNUAL REPORTS AND/OR FEES MUST BE OBTAINED FROM THE NEW HAMPSHIRE BANKING DEPARTMENT.

Business ID: 879474

Certificate Number: 0005427547



IN TESTIMONY WHEREOF,

I hereto set my hand and cause to be affixed
the Seal of the State of New Hampshire,
this 27th day of August A.D. 2021.

A handwritten signature in black ink, appearing to read "Wm Gardner".

William M. Gardner
Secretary of State