## F96000000121

TO: Qualification/Tax Lien Section Division of Corporations

SUBJECT: Russell Fund Distributors. Inc.
(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", 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:

(Name of Person)	•
Russell Fund Distributors, Inc.	•
(Firm/Company)	
909 A Street	
(Address)	
Tacoma, WA 98402	
(City/State/Zip)	

Should you need to call someone concerning this matter, please call:

Carla Anderson 8t ( 206 ) 596-3067
(Name of Person) (Area Code & Daytime Telephone Number)

#### **COURIER ADDRESS:**

Qualification/Tax Lien Sec. Division of Corporations 409 E. Gaines St Tallahassee, FL 32399

#### **MAILING ADDRESS:**

Qualification/Tax Lien Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

## 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. Russell Fund Distributors, Inc.		
(Name of corporation: must include the word "INCORPOR abbreviations of like import in language as will clearly indic person or partnership if not so contained in the name at pre	ATED", "COMPANY", "CORPORAT ate that it is a corporation instead of a sent.)	ION" or words or natural
2. Washington	3. 91-1397660	
(State or country under the law of which it is incorporated)	(FEI number, if ap	plicable)
4. January 15, 1988	5, Perpetual	
(Date of Incorporation)	(Duration: Year corp. will cease to	exist or "perpetual")
6. January 2, 1996		
(Date first transacted business in Florida. (SEE SECTIONS	8 607.1501, 607.1502, AND 817.155, F.	.S.)
7. 909 A Street		
Tacona MA 98402 (Current mailin		
The transaction of any and all lawful bu effecting securities transactions as pri-	siness, including, but no ncipal or agent.	t limited to,
(Purpose(s) of corporation authorized in home state or country Florida)	y to be carried out in the state of	
9. Name and street address of Florida registered acceptable)	agent: (P.O. Box or Mail Drop	<del></del>
,		\$ <del>\$</del>
Name: Prederick M. Hanish		
		<b>* * * * * * * *</b>
Office Address: 5850 T.G. Lee Blvd., Suite 650	1	5 FA
Office Addicas, South 1.4. Mar Blad., Suite dat	<del>,</del>	مُحْرُدُ وَ وَ
mul and a	<b></b>	- F F F F F
Orlando	, Florida , <u>32822</u>	
10. Registered agent's acceptance:	(Zip Code)	DIVISION OF CORPORATIONS  96 JAN -5 PH 3: 05
Having been named as registered agent and to accept corporation at the place designated in this application registered agent and agree to act in this capacity. It all statutes relative to the proper and complete performand accept the obligations of my position as registered.	n, I hereby accept the appointm further agree to comply with the rmance of my duties, and I am t	east an
trebent m	There	
(Registered agent's	s signature)	

11. 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.

12. Names and addresses of officers and/or directors: (Street address ONLY-P. O. Box NOT acceptable) A. DIRECTORS (Street address only- P. O . Box NOT acceptable) Chairman: Please see Schedule A, attached. Address: Vice Chairman: Address: Director: Address: \_\_\_\_\_ Director: B. OFFICERS (Street address only- P. O. Box NOT acceptable) President: Please see Schedule A. attached. Address: Vice President: \_\_\_\_\_ Address: \_\_\_\_\_ Secretary: \_\_ Address: \_\_\_\_\_ Treasurer: NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors 13. (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. J. David Gricwold, Associate General Counsel, Assistant Secretary and
(Typed or printed name and capacity of person signing application)
Chief Compliance Officer

# SECRETARY OF STATEMS OF CHROMATICMS

## Schedule A

## RUSSELL FUND DISTRIBUTORS, INC. Directors and Officers

### **Business Address of All:**

## 909 A Street Tacoma, WA 98402

NAME AND SSN	OFFICIAL CAPACITY	RESIDENCE
Lynn L. Anderson 514-36-3191	Chairman of the Board and Chief Executive Officer	6217 139th Pl. S.E. Bellevue, WA 98006
Kurl J. Ege 142-32-4247	Secretary and General Counsel	933 21st Avenue East Scattle, WA 98112
J. David Griswold 534-72-8675	Assistant Secretary, Associate General Counsel and Chief Compliance Officer	3006 38th Avenue S.W. Seattle, WA 98126
Mary E. Hughs 538-56-4767	Assistant Secretary	6303 South 298th Place Auburn, WA 98001
Nancy M. Jacoby 315-62-1688	Assistant Secretary	1005 Brentwood Firerest, WA 98466
John C. James 076-36-3584	Assistant Secretary	3001 Vista View Dr. N. Tacoma, WA 98407
Randall P. Lert 567-88-5774	Director	601 N. C Street Tacoma, WA 98403
Gregory J. Lyons 027-52-6866	Assistant Secretary	2514 N. Junett Street Tacoma, WA 98406
Eric A. Russell 535-66-4857	Director and President	7908 Olympic View Dr. NW Gig Harbor, WA 98335
Norma P. Schellberg 136-30-4097	Treasurer	8315 161st Ave. KPS Longbranch, WA 98351

## STATE of WASHINGTON

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DIVISION OF CORPORATION

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SEAREMARY OF STATE.

## CERTIFICATE OF EXISTENCE/AUTHORIZATION

**OF** 

#### RUSSELL FUND DISTRIBUTORS, INC.

I, RALPH MUNRO, Secretary of State of the State of Washington, hereby certify that I am the custodian of the corporation records of this state.

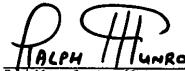
I FURTHER CERTIFY that the records on file in this office show that the above named profit corporation was formed under the laws of the State of Washington and was issued a certificate of incorporation in Washington on January 15, 1988.

I FURTHER CERTIFY that, as of the date of this certificate. no Articles of Dissolution or Certificate of Withdrawal have been filed, that the conditions of the Revised Code of Washington, Title 23B.01.280(2) (a) through (d) have been met, and the

corporation is duly authorized to transact business in the

corporate form in the State of Washington.

Date: December 18, 1995 Given under my hand and the Seal of the State of Washington at Olympia, the State Capital



Ralph Munro, Secretary of State

H. Kramer