#63353

(Re	questor's Name)	
(Ad	dress)	
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PICK-UP	WAIT	MAIL
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(00	Siliess Littly Nai	ne,
(Do	cument Number)	
Certified Copies	Certificates	of Status
Consist Instructions to	Filing Officer	- · · · ·
Special Instructions to	Filing Officer:	





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JECRETARY OF STATE
ANASSEE, FLORID

COVER LETTER

TO: Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

NAME OF COR	RPORATION: Eagle Fund Services, Inc.			
DOCUMENT NU	JMBER:	H63353		
The enclosed Artic	cles of Amendment and fee a	are submitted for filing.		
Please return all co	orrespondence concerning th	is matter to the following:		
		Susan Walzer		
	7	Name of Contact Person		
	Eagle A	Asset Management, Inc.		
		Firm/ Company		
	880 Carillon Parkway			
		Address		
		Petersburg, FI 33716 City/ State and Zip Code	.	
		•		
	E-mail address: (to be use	zer@EagleAsset.com d for future annual report notification)	· · · · · · · · · · · · · · · · · · ·	
For further inform	ation concerning this matter,	please call:		
	Susan Walzer	at (727) 5 Area Code & Daytime Te	67-3526	
	e of Contact Person			
Enclosed is a chec	k for the following amount n	nade payable to the Florida Depar	tment of State:	
	☐ \$43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing A		Street Address Amendment Section		
Amendment Section Division of Corporations		Division of Corporations		

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301



December 29, 2009

SUSAN WALZER EAGLE ASSET MANAGEMENT, INC. 880 CARILLON PKWY ST PETERSBURG, FL 33772

SUBJECT: EAGLE FUND SERVICES, INC.

Ref. Number: H63353

We have received your document for EAGLE FUND SERVICES, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must have original signatures.

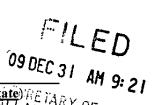
Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6892.

Letter Number: 309A00039433

Tina Roberts Regulatory Specialist II

Articles of Amendment to **Articles of Incorporation**



of Eagle Fund Services, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) RETARY OF STATE AHASSEE, FLORIDA (Document Number of Corporation (if known)

owing

Pursuant to the provisions of section 607.1 amendment(s) to its Articles of Incorporation A. If amending name, enter the new name	n:	•	ne Corporation adopts the folia
name must be distinguishable and contai abbreviation "Corp.," "Inc.," or Co.," or name must contain the word "chartered," "p	the designation "Cor	p." "Inc," or "Co	". A professional corporation
B. Enter new principal office address, if a (Principal office address MUST BE A STR.)			
C. Enter new mailing address, if applical (Mailing address MAY BE A POST OF			
D. If amending the registered agent and/o new registered agent and/or the new re			enter the name of the
Name of New Registered Agent:			
New Registered Office Address:	(Floride	a street address)	
	(City)		, Florida (Zip Code)
New Registered Agent's Signature, if chan I hereby accept the appointment as registere			the obligations of the position.
-	Signature of New R	egistered Agent, if	changing

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

<u>Title</u>	<u>Name</u>	Address	Type of Action
			☐ Add☐ Remove
	- Plans		Add Remove
	amending or adding additional Ar tach additional sheets, if necessary).		
F. <u>I</u>	f an amendment provides for an exprovisions for implementing the am (if not applicable, indicate N/A)	schange, reclassification, or cancellation rendment if not contained in the amend	ı of issued shares, ment itself:

Eagle Fund Services, Inc. list of Officer's & Director's should read as follows:

- J. Cooper Abbott 880 CARILLON PARKWAY ST PETERSBURG FL 33716
 - 1. President
 - 2. Director
- o Richard J. Rossi 880 CARILLON PARKWAY ST PETERSBURG FL 33716
 - 1. Director
- o Eric Wilwant 880 CARILLON PARKWAY ST PETERSBURG FL 33716
 - 1. Director
- M. Lisa Crater 880 CARILLON PARKWAY ST PETERSBURG FL 33716
 - Comptroller
 Treasurer
- o Bradley Bond 880 CARILLON PARKWAY ST PETERSBURG FL 33716
 - Assistant Treasurer
- Stephen W. Faber 880 CARILLON PARKWAY ST PETERSBURG FL 33716
 - 1. Secretary
- Deborah Malina 880 CARILLON PARKWAY ST PETERSBURG FL 33716
 - 1. Assistant Secretary

The date of each amendment	(s) adoption:	mby 8,2009
Effective date if applicables	(date of adoption is re	equired)
Effective date if applicable:	(no more than 90 days after amendment	file date)
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/we by the shareholders was/was/was/was/was/was/was/was/was/was/	re adopted by the shareholders. The numere sufficient for approval.	ber of votes cast for the amendment(s)
	re approved by the shareholders through a d for each voting group entitled to vote so	
"The number of votes	cast for the amendment(s) was/were suffi	cient for approval
by	(voting group)	·"
The amendment(s) was/we action was not required.	re adopted by the board of directors with	out shareholder action and shareholder
The amendment(s) was/we action was not required.	re adopted by the incorporators without s	hareholder action and shareholder
DatedSignature	18 Dec 2009	
(By sele	o director, president or other officer - if ected, by an incorporator - if in the hands ointed fiduciary by that fiduciary)	directors or officers have not been of a receiver, trustee, or other court
	T. Cooper (Typed or printed name of p	Hobott Derson signing)
	(Title of person signing)	nt