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1/11/2018



Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

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To:

Division of Corporations

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From:

Account Name : C T CORPORATION SYSTEM

Account Number : FC4000000023 Phone : (614)280-3338

: (954)208-0845 Fax Number

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Address:		
	Address:	Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN SUNGARD BROKERAGE & SECURITIES SERVICES LLC

Certificate of Status	0
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Page Count	04
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Electronic Filing Menu

Corporate Filing Menu

S. WARREN JAN 12 2018

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT **BUSINESS IN FLORIDA**

SECTION I (1-4 must be completed)

1. Name of limited liability Company as it appears on the records of the Florida Department of			
State: SUNGARD BROKERAGE & SECURITIES SERVICES LLC		_	
Enter new principal office address, if applicable:		_	
(Principal office address MUST BE A STREET ADDRESS)		- -	
Enter new mailing address, if applicable: (Mulling address MAY BE A POST OFFICE BOX)			
2. The Florida document number of this limited liability company is: M0300001165		_	
3. Jurisdiction of its organization: Delaware		_	
4. Date authorized to do business in Flerida: 04/14/2003		_	
SECTION II (5-9 complete only the applicable changes) 5. New name of the limited liability company: FIS Brokerage & Securities Services (must contain "Limited Liability Company," "L.L.C.,"	LLC][")	
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida copy of the written consent of the managers or managing members adopting the alternate name. The must contain "Limited Linbility Company." "L.L.C." or "LLC.")	a end attac : alternate	Benne Manne	
6. If amending the registered agent and/or registered officer address on our records, enter the name or registered agent and/or the new registered office address here:	of the new	Hq PH	
Name of New Registered Agent:		-6 73	`-
New Registered Office Address: Enter Floridu Street Address		<i>ce</i> o-	
		ယ	
	in Code	_	
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree the provisions of all statutes relative to the proper and complete performance of my duties, and I an and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Comment is being filed to morely reflect a change in the registered affice address. Thereby confirm liability company has been notified in writing of this change.	es to comp n familiar Or, if this	with	

.: •

• • •

7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction: 8. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change:					
			Add		
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			Add		
aforementioned an	Ronald E. Vallo	ne official having custody of recorded. Lead to the control of the control of recorded to the custom series of th	rds in the 1.0 AN 11 PH 12: 93		

<u>Delaware</u>

Page 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY THAT THE SAID 'SUNGARD BROKERAGE &

SECURITIES SERVICES LLC', FILED A CERTIFICATE OF AMENDMENT,

CHANGING ITS NAME TO 'FIS BROKERAGE & SECURITIES SERVICES LLC'

ON THE TWENTY-FIFTH DAY OF FEBRUARY, A.D. 2016, AT 11:36 O'CLOCK

A.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE EFFECTIVE DATE OF THE AFORESAID CERTIFICATE OF AMENDMENT IS THE TWENTY-SIXTH DAY OF FEBRUARY, A.D. 2016.

E .:

Authentication: 201955173

Date: 01-11-18

3172117 8320 SR# 20180192713

You may verify this certificate online at corp.delaware.gov/authver.shtml