

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H140000811903)))



HI40000611903ABCY

Note: DO NOT	hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.
	"KE-208IVII"*
To:	Division of Corporations Fax Number: (850) 617-6383
	Fax Number : (850) 617-6383
From:	ACCOUNT NAME : C T CORPORATION SYSTEM
	Account Number : FCA000000023
	Phone : (850)222-1092
	70 10

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

Email Address:

RECEIVED
APR-7 AM 10: 30
SORE SOLUTION OF THE

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN HARTFORD INVESTMENT FINANCIAL SERVICES, LLC

Certificate of Status	0
Certified Copy	0
Page Count	9504
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu

Help

ARR 0 8 2014 D. BRUCE 850-617-6381 4/7/2014 8:14:42 AM PAGE 1/001 Fax Ser



April 7, 2014

FLORIDA DEPARTMENT OF STATE

HARTFORD INVESTMENT FINANCIAL SERVICES, LLC 200 HOPMEADOW ROAD SIMSBURY, CT 06089

RE-SUBMIT

SUBJECT: HARTFORD INVESTMENT FINANCIAL SERVICES, LLO PLOG POR CONTROL OF SUBMISSION 4/4/14

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

A foreign limited liability company which needs to correct any false statement or has changed its name, duration, or jurisdiction should file an amended application in this office within 30 days after the occurence of any such change. The form should be accompanied by a filing fee of \$25, an additional \$30 for each certified copy (optional) requested, and an original certificate from the domicile state when amending the name, duration, or jurisdiction. Said certificate must evidence the amendment and be issued within the last 90 days.

If the amendment is merely to correct a false statement listed on a document previously filed with the Florida Department of State or does not require an amendment to be filed in its domicile state or country, a certificate is not necessary.

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) 245-6051.

Deborah Bruce Regulatory Specialist II FAX Aud. #: H14000081190 Letter Number: 514A00007331

RY OF STATE

RECEIVED

P.O BOX 6327 - Tallahassee, Florida 32314

COVER LETTER

Registration Section Division of Corporations SUBJECT: Hartford Investment Financial Services, LLC Name of Foreign Limited Liability Company Dear Sir or Madam: The enclosed application, certificate and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Name of Person Firm/Company Address City/State and Zip Code Corporateannualreports@thebartford.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Area Code & Daytime Telephone Number Name of Person STREET/COURIER ADDRESS: MAILING ADDRESS: Registration Section Registration Section Division of Corporations Division of Corporations Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, Florida 32314 Tallahassee, Florida 32301 Enclosed is a check for the following amount: □ \$55 Filing Fee & □ \$25 Filing Fee ☐ \$30 Filing Fee & \$60 Filing Fcc, Certificate of Status Certified Copy Certificate of Status &

Certified Copy

CR2E055 (12/13)

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

SECTION I (1-3 must be completed)	
Name of limited liability Company as it appears on the records of the Florida Department State: Hartford Investment Financial Services, LLC	tment of
. Jurisdiction of its organization: Delaware	
. Date authorized to do business in Florida: 07/02/2007	<u> </u>
ECTION II (4-7 complete only the applicable changes)	
. New name of the limited liability company: Hartford Funds Distributors, LLC	
(must contain "Limited Liability Company, " "L.L.C	" or "LLC.")
If name unavailable, enter alternate name adopted for the purpose of transacting busing lorida and attach a copy of the written consent of the managers or managing members at alternate name. The alternate name must contain "Limited Liability Company," "L. r "LLC.") If the amendment changes the jurisdiction of organization, indicate new jurisdiction	adopting L.C."
. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate
Attached is an original certificate, if required: no more than 90 days old, evidencing aforementioned amendment(s), duly authenticated by the official having custody of jurisdiction under the law of which this entity is organized.	records in the
Signature of the authorized representative	2014
- estimated of the senior tole selections of	
Terense Shields	ASS
Typed or printed name of signee	Ladinar
Filing Fee: \$25.00	PH 1: 13

FLOO7 - 00/04/1014 C T Filing Memger Collect

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THAT THE SAID "HARTFORD INVESTMENT FINANCIAL SERVICES, LLC", FILED A CERTIFICATE OF AMENDMENT, CHANGING ITS NAME TO "HARTFORD FUNDS DISTRIBUTORS, LLC", THE TENTH DAY OF JUNE, A.D. 2013, AT 12:21 O'CLOCK P.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE EFFECTIVE DATE OF THE AFORESAID CERTIFICATE OF AMENDMENT IS THE FOURTEENTH DAY OF JUNE, A.D. 2013.

2014 APR -4 PM 1: 13

2691551 8320

140426076

You may verify this certificate online

Jeffrey W. Bullack, Secretary of State

UTHENTY CATION: 1265654

DATE: 04-03-14