## P98000048286

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## **COVER LETTER**

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**TO:** Amendment Section Division of Corporations

NAME OF CORPO	RATION:	INTL FCStone Financial	Inc.
DOCUMENT NUMI		P98000048286	
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	David A. Bolte		
	<del></del>	Name of Contact Persor	1
	INTL FCStone Financial In	c.	
	· · · · · · · · · · · · · · · · · · ·	Firm/ Company	
	1075 Jordan Creek Parkway		
		Address	
	West Des Moines, IA 5026	6	
		City/ State and Zip Code	2
	david.bolte@stonex.com		
		sed for future annual report	notification)
For further information  David A. Bolte	n concerning this matter, plea	se call:	223-3797
Name of Contact Person			) de & Daytime Telephone Number
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:
\$35 Filing Fee	□\$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 Address Amendment Section Division of Corporations		Amend	Address Iment Section on of Corporations
P.O. Box 6327		The Centre of Tallahassee	
Tallahassee, FL 32314		2415 N	N. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

INTL FCStone Financial Inc.

			7777 : : 21 = 21 + 13
(Name	of Corporation as curre	ntly filed with the Florid	da Dept. of State)
	P9800	0048286	
	(Document Numbe	r of Corporation (if know	n)
Pursuant to the provisions of section 607 ts Articles of Incorporation:	.1006, Florida Statutes, th	ais <i>Florida Profit Corpor</i>	ation adopts the following amendment(
A. If amending name, enter the new n	ame of the corporation:		
StoneX Financial Inc.			Thenew
name must be distinguishable and contain 'Inc.," or Co.," or the designation "C 'chartered," "professional association,	Corp." "Inc." or "Co".	A professional corpor	orated" or the abbreviation "Corp.,"
	· · · · · · · · · · · · · · · · · · ·	N/A	
<ol> <li>Enter new principal office address, Principal office address MUST BE A S</li> </ol>			
. 33	,		
Enter new mailing address, if appl (Mailing address MAY BE A POST		N/A	
A. If amouding the projetored agent as	ud/au uagistanad affica a	ddusse in Etonida, enten	the name of the
<ol> <li>If amending the registered agent an new registered agent and/or the ne</li> </ol>			the name of the
	N/A		
Name of New Registered Agent			
	/rt: J.	street address)	
	N/A	street adaress)	
New Registered Office Address:		(City)	, Florida(Zip Code)
		(Cily)	(zip cone)
New Registered Agent's Signature, if o	hanging Registered Age	ent:	
hereby accept the appointment as regis.	tered agent. I am familio	ar with and accept the ob	ligations of the position.
	Signature of Mon	v Registered Agent, if cha	incing
	ingiliative of Nev	r negimerea ngem, y cha	organg.

Check if applicable

<sup>☐</sup> The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example:

X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change		~	
Add			
Remove			
2) Change			
Add			
Remove 3) Change	<del></del>	_	
Add			
Remove			
4) Change			
Add			
Remove			
5) Change	<b></b>	-	
Add			
Remove			
6) Change			
Add			
Remove			

(Attach additional sheet	g additional Artic ts, if necessary).	(Be specific)				
<b>1/A</b>						
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. If an amendment prov	vides for an exch	ange, reclassifica	tion, or cancellati	ion of issued sha	ires,	
provisions for impler (if not applicable,	menting the amer , indicate N/A)	iament it not con	itained in the ame	enament itseii:		
J/A						
<del></del>						
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	July 20, 2020	TP - cl Alicent Alice
	endment(s) adoption:	, if other than th
date this document wa	<del>-</del>	
	August 1, 2020	
Effective date <u>if app</u> l	icable:	<u> </u>
	(no more than 90 days after amendment file date)	
Note: If the date inseded document's effective	erted in this block does not meet the applicable statutory filing requirements, the date on the Department of State's records.	nis date will not be listed as th
Adoption of Amenda	nent(s) ( <u>CHECK ONE</u> )	
☐ The amendment(s) action was not requ	was/were adopted by the incorporators, or board of directors without shareholde nired.	r action and shareholder
	was/were adopted by the shareholders. The number of votes cast for the amendars was/were sufficient for approval.	ment(s)
must be separatel	was/were approved by the shareholders through voting groups. The following st v provided for each voting group entitled to vote separately on the amendment(s)	atement :
"The numbe	r of votes cast for the amendment(s) was/were sufficient for approval	
by	W	
	(voting group)	
Day	July 20, 2020	
Dal Sig	nature Awil A Rolto	
J.g	(By a director, president or other officer - if directors or officers have not	been
	selected, by an incorporator – if in the hands of a receiver, trustee, or othe	r court
	appointed fiduciary by that fiduciary)	
	David A. Bolte	
	(Typed or printed name of person signing)	
	Secretary	
	(Title of person signing)	