

2017 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M03000000016

Entity Name: CREDIT SUISSE SECURITIES (USA) LLC**Current Principal Place of Business:**11 MADISON AVENUE
ATTN: CORP. TAX DEPT.
NEW YORK, NY 10010**Current Mailing Address:**11 MADISON AVENUE
ATTN: CORP. TAX DEPT.
NEW YORK, NY 10010**FEI Number:** 05-0546650**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 US*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.***SIGNATURE:**_____
Electronic Signature of Registered Agent_____
Date**Authorized Person(s) Detail :**Title MANAGER
Name BLAKE, TIMOTHY W
Address 11 MADISON AVENUE
City-State-Zip: NEW YORK NY 10010Title SECRETARY
Name WIRSHIBA, LEWIS
Address 1 MADISON AVENUE
City-State-Zip: NEW YORK NY 10010Title T
Name SHROPSHIRE, JOSEPH J
Address 11 MADISON AVENUE
City-State-Zip: NEW YORK NY 10010Title VP
Name FINLAN, THOMAS A
Address 11 MADISON AVENUE
City-State-Zip: NEW YORK NY 10010Title ASST. SECRETARY
Name MATTY, RHONDA G
Address 11 MADISON AVENUE
City-State-Zip: NEW YORK NY 10010

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: THOMAS A. FINLAN

VP

04/19/2017

Electronic Signature of Signing Authorized Person(s) Detail_____
Date