

2015 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M08000002031

**FILED
Mar 20, 2015
Secretary of State
CC5400917420**

Entity Name: ICAP SERVICES NORTH AMERICA LLC

Current Principal Place of Business:

HARBORSIDE FINANCIAL CENTER
1100 PLAZA FIVE
JERSEY CITY, NJ 07311

Current Mailing Address:

HARBORSIDE FINANCIAL CENTER
1100 PLAZA FIVE
JERSEY CITY, NJ 07311 US

FEI Number: 52-2067168

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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	Title	MANAGER, CEO
Name	DEFLORA, NICHOLAS	Name	NIXON, JOHN
Address	HARBORSIDE FINANCIAL CENTER 1100 PLAZA 5	Address	HARBORSIDE FINANCIAL CENTER 1100 PLAZA 5
City-State-Zip:	JERSEY CITY NJ 07311	City-State-Zip:	JERSEY CITY NJ 07311
Title	VP		
Name	ALTAMORE, STEVE		
Address	HARBORSIDE FINANCIAL CENTER 1100 PLAZA 5		
City-State-Zip:	JERSEY CITY NJ 07311		

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: STEVEN ALTAMORE

VP -TAX

03/20/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date