LIMITED PARTNERSHIP
UNIFORM BUSINESS REPORT (UBR)

5/3/31

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

02 MAY 17 PM 2:07

DOCUMENT # A27727

1. Entity Name

Spear, Leeds + Kellogg Limited Partnership

DO NOT WRITE IN THIS SPACE

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
120 Broadway, 7Th Floor	120Broadway, Legal Dept
Suite, Apt. #, etc.	Suite, Apt. #, etc. Attn: Casey Early 7Th Floor
City & State: New York New York	City & State: New York, New York
Zip: 10271 Country: USA	Zip: 10271 Country: USA

DUE BY MAY 1

4. FEI Number 13-5515160 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name: Corporation Service Company

Street Address (P.O. Box Number is Not Acceptable): 1201 Hays Street

City: Tallahassee FL Zip Code: 32301-2525

8. 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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable

9. Capital Contributions as Shown on record. $ 67,000.00

10. Amount of Capital Contributions in FLORIDA to date.

11. MAKE CHECK PAYABLE TO DEPT. OF STATE
SEE REVERSE SIDE FOR FEE INFORMATION

A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.

12. GENERAL PARTNER INFORMATION

DOCUMENT #	M97000000271	STREET ADDRESS	
NAME	SLK LLC	CITY-ST-ZIP	700005678407--0
STREET ADDRESS	120 Broadway		-06/04/02--01083--006
CITY-ST-ZIP	New York, NY 10271		****526.25 ****526.25
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STAPLE CHECK HERE

CR2E003B (12/01)

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes.

SIGNATURE: Steven A. Wolf Steven A. Wolf 4/10/02 (212) 433-6947
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER — Date — Daytime Phone #

Vice President of General Partner