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| (Re | questor's Name) | |
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| PICK-UP | ☐ WAIT | MAIL |
| (Bu | isiness Entity Na | me) |
| (Do | ocument Number | |
| Certified Copies | _ Certificate | s of Status |
| Special Instructions to | Filing Officer: | |
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COVER LETTER

| TO: | Registration S Division of C | | | | |
|---------|--|-------------------------------------|---------------|---|--|
| SUBJ | The Op | tions Clearing Corporation | on | | |
| 2019 | LC1. | Name of | corporation | - must include suffix | |
| Dear S | ir or Madam: | | | | |
| "Certif | ficate of Exister | | Good Stan | ding" and check are sul | act Business in Florida," bmitted to register the |
| Please | return all corre | spondence concerning | this matter | to the following: | |
| Jacque | line Soto | | | | |
| | | | Name of F | erson erson | |
| The Op | otions Clearing C | orporation | | | |
| | | | Firm/Comp | рапу | |
| 125 S. | Franklin Street, S | Suite 1200 | | | |
| Chicag | o, Illinois 60606 | | Addre | SS | |
| isoto@ | theocc.com | c | ity/State an | d Zip code | |
| JS010@ | | F-mail address: (t | o he used fo | or future annual report | notification) |
| | | · | | • | notification) |
| For fur | ther information | n concerning this matt | er, please ca | dl: | |
| Jacquel | ine Soto | | 312 | 322-2026 | |
| | Name of Pers | | Area Code | Daytime Telep | hone Number |
| Englass | Registration Services Division of Concentration Building 2661 Executive Tallahassee, F | rporations ng e Center Circle | | MAILING A Registration S Division of Co P.O. Box 632 Tallahassee, F | Section orporations 7 |
| | .00 Filing Fee | \$78.75 Filing Fe | e & 🗆 | \$78.75 Filing Fee & Certified Copy | \$87.50 Filing Fee, Certificate of Status & Certified Copy |

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

| The Options Cl | earing Corporation | DEC. |
|-------------------|---|--|
| (Enter name of o | corporation; must include "INCORPORATED, Corp," "Inc," "Co," or "Corp.") | " "COMPANY," "CORPORATION," |
| (If name unavail | able in Florida, enter alternate corporate name | adopted for the purpose of transacting business in Florida) |
| Delaware 2 | 3 | 322756407 |
| | y under the law of which it is incorporated) | (FEI number, if applicable) |
| | 5. | |
| (Date | of incorporation) 5. | (Date of duration, if other than perpetual) |
| 6. | | |
| | | n Florida, if prior to registration) 502, F.S., to determine penalty liability) |
| 125 S. Franklin S | treet, Suite 1200, Chicago, IL 60606 | see, rie, to ocionimo penany naoviny, |
| / <u>_</u> | (Princi) | pal office address) |
| | (Current mailin | ng address, if different) |
| 8. Name and stree | et address of Florida registered agent: (P.0 | D. Box <u>NOT</u> acceptable) |
| Name: | CT Corporation Systems | |
| Office Address: | 1200 South Pine Island Road | |
| | Plantation | 33324 , Florida |
| | (City) | (Zip code) |

9. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

James M. Halpin
Assistant Secretary

(Registered agent's signature)

10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

11. Names and business addresses of officers and/or directors:

| A. DIRE | Craig S. Donohue | | |
|-------------|--|---------------|----------|
| Chairman | | | , m |
| Address: | 125 S. Franklin Street, Suite 1200, Chicago, IL 60606 | <u> </u> | () |
| | | (C) | |
| Vice Chair | | • • | |
| | rman: | | ٠. |
| Address: | | 9. | |
| _ | | | |
| Director: | | | |
| | | | |
| | | | |
| - | | | |
| Director: | | | |
| Address: | | | |
| | | | |
| B. OFFI | CERS | · | |
| | John P. Davidson, III | | |
| | 125 S. Franklin Street, Suite 1200, Chicago, IL 60606 | | |
| Address: _ | 123 3. Frankfill Street, State 1200, Clincago, IL 00000 | _ | |
| - | | | · |
| Vice Presid | dent: | | |
| | | | |
| Address: _ | | | |
| - | Mary Malay Color | | |
| Secretary: | Megan Malone Cohen | | <u> </u> |
| Address: _ | 125 S. Franklin Street, Suite 1200, Chicago, IL 60606 | | |
| Treasurer: | | | |
| | | | |
| Address: _ | | | |
| NOTE: I | f necessary, you may attach an addendum to the application listing additional officers and/or dis | rectors. | |
| 12 | logar Milone When, Frp and Corporate Sun | tary | |
| The office | Signature of Director or Officer | ل | |
| | er or director signing this document (and who is listed in number 11 above) affirms that the facts and that he or she is aware that false information submitted in a document to the Department of S | | |
| a third deg | gree felony as provided for in s.817.155, F.S. | V V | |
| 13. Mega | n Malone Cohen, First Vice President and Corporate Secretary | | |
| | (Typed or printed name and capacity of person signing application) | | |



I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "THE OPTIONS CLEARING CORPORATION" IS

DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN

GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE

RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-SIXTH DAY OF

NOVEMBER, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "THE OPTIONS

CLEARING CORPORATION" WAS INCORPORATED ON THE TWENTY-EIGHTH DAY OF

AUGUST, A.D. 1972.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

Authentication: 203956559

Date: 11-26-18