

3/29/2019

Division of Corporations  
Florida Department of State  
Division of Corporations  
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To: Division of Corporations  
Fax Number : (850)617-6383

From: Account Name : C T CORPORATION SYSTEM  
Account Number : FCA000000023  
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TAMPA FLORIDA

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: \_\_\_\_\_

**FOREIGN PROFIT/NONPROFIT CORPORATION**  
**SCHRODER INVESTMENT MANAGEMENT NORTH AMERICA INC.**

Certificate of Status	0
Certified Copy	1
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Estimated Charge	\$78.75

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APR - 2019

S. PRATHER

# 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.

1. Schroder Investment Management North America Inc.  
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")
- (if name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
2. Delaware 3. 13-4064414  
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 05/06/1999 5. \_\_\_\_\_  
(Date of incorporation) (Date of duration, if other than perpetual)
6. March 1, 2019  
(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 7 Bryant Park 19th Floor New York, NY 10018  
(Principal office address)
- \_\_\_\_\_  
(Current mailing address, if different)
8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)  
Name: C T Corporation System  
Office Address: 1200 South Pine Island Road  
Plantation, Florida 33324  
(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.*

C T Corporation System

By: William Holloway, Asst. Sec.  
(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.

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

**A. DIRECTORS**

Chairman: Please See Attached Addendum

Address: \_\_\_\_\_

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

**B. OFFICERS**

President: Please See Attached Addendum

Address: \_\_\_\_\_

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_

Secretary: \_\_\_\_\_

Address: \_\_\_\_\_

Treasurer: \_\_\_\_\_

Address: \_\_\_\_\_

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

12. Mark A. Heinenetz

Signature of Director or Officer

The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

13. Mark A. Heinenetz Chief Operating Officer

(Typed or printed name and capacity of person signing application)

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FLORIDA

**Exhibit A****Officers**

<b>Title</b>	<b>Name</b>	<b>Address</b>	<b>City/State/zip</b>
Chairman & Chief Executive Officer	Karl Dasher	7 Bryant Park	New York, NY, 10018
Chief Operating Officer	Mark A. Hemenetz	7 Bryant Park	New York, NY, 10018
Chief Compliance Officer	Joe Bertini	7 Bryant Park	New York, NY, 10018
Secretary	Patricia Woolridge	90 Pitts Bay Road	Pembroke, Bermuda, HM08
Assistant Secretary	Carin Muhlbaum	7 Bryant Park	New York, NY, 10018
Assistant Secretary	Janice McCann	90 Pitts Bay Road	Pembroke, Bermuda, HM08
Assistant Secretary	Ryan Chelf	7 Bryant Park	New York, NY, 10018
Financial Controller	Richard Lowe	7 Bryant Park	New York, NY, 10018

**Directors**

<b>Title</b>	<b>Name</b>	<b>Address</b>	<b>City/State/zip</b>
Director	Karl Dasher	7 Bryant Park	New York, NY, 10018
Director	Mark A. Hemenetz	7 Bryant Park	New York, NY, 10018
Director	Richard Lowe	7 Bryant Park	New York, NY, 10018
Director	Marc Brookman	7 Bryant Park	New York, NY, 10018

# Delaware

The First State

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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SCHRODER INVESTMENT MANAGEMENT NORTH AMERICA INC." 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-EIGHTH DAY OF MARCH, A.D. 2019.

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

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



3039648 8300

SR# 20192348459

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

A handwritten signature in black ink, appearing to read "JBULLOCK", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed.

Jeffrey W. Bullock, Secretary of State

Authentication: 202533986

Date: 03-28-19