

MO2000003389

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300009483953

12/18/02--01022--019 **130.00

RECEIVED
02 DEC 18 AM 11:38
TALLAHASSEE, FLORIDA
SECRETARY OF STATE
DIVISION OF CORPORATIONS

FILED
02 DEC 18 PM 1:22
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

12/18
JST

CT CORPORATION

December 18, 2002

Secretary of State, Florida
409 East Gaines Street
Tallahassee FL 32399

FILED
02 DEC 18 PM 1:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Re: Order #: 5748320 SO
Customer Reference 1:
Customer Reference 2:

Dear Secretary of State, Florida:

Please file the attached:

Schonfeld & Company LLC (NY)
Registration
Florida

Please return a good standing certificate along with regular evidence.

Enclosed please find a check for the requisite fees. Please return evidence of filing(s) to my attention.

If for any reason the enclosed cannot be filed upon receipt, please contact me immediately at (850) 222-1092. Thank you very much for your help.

Sincerely,

Jeffrey J Netherton
Sr. Fulfillment Specialist
Jeff_Netherton@cch-lis.com

660 East Jefferson Street
Tallahassee, FL 32301
Tel. 850 222 1092
Fax 850 222 7615

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO
TRANSACTION BUSINESS IN FLORIDA**

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACTION BUSINESS IN THE STATE OF FLORIDA:

1. SCHONFELD & COMPANY, LLC
(Name of foreign limited liability company)

2. NEW YORK 3. 11-3448407
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. 8/25/1998 5. 12/31/2021
(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")

6. JANUARY 2, 2003
(Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.))

7. ONE JERICHO PLAZA
JERICHO, NY 11753
(Street address of principal office)

8. If limited liability company is a manager-managed company, check here ☒

9. The name and usual business addresses of the managing members or managers are as follows:

SCHONFELD GROUP HOLDINGS, LLC
ONE JERICHO PLAZA
JERICHO, NY 11753

10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.)

11. Nature of business or purposes to be conducted or promoted in Florida: _____

REGISTERED BROKER-DEALER

Signature of a member or an authorized representative of a member.
(In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

STEVEN B. SCHONFELD
Typed or printed name of signee

FILED
02 DEC 18 PM 1:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES,
THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING
STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE
STATE OF FLORIDA.

1. The name of the Limited Liability Company is:

SCHONFELD & COMPANY, LLC

2. The name and the Florida street address of the registered agent and office are:

CT SYSTEM CORPORATION
(Name)

1200 SOUTH PINE ISLAND Rd
Florida street address (P.O. Box **NOT** ACCEPTABLE)

PLANTATION, FL 33324
(City/State/Zip)

02 DEC 18 PM 1:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.

Patrick A. Nolan

(Signature)

Patrick A. Nolan
Assistant Secretary

\$ 100.00	Filing Fee for Application
\$ 25.00	Designation of Registered Agent
\$ 30.00	Certified Copy (optional)
\$ 5.00	Certificate of Status (optional)

**State of New York } ss:
Department of State**

I hereby certify, that SUBERT SECURITIES, LLC a NEW YORK Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 08/25/1998, and that the Limited Liability Company is subsisting so far as shown by the records of the Department.

A Certificate of Amendment SUBERT SECURITIES, LLC, changing its name to SCHONFELD & COMPANY LLC, was filed 08/27/2002.



*Witness my hand and the official seal
of the Department of State at the City
of Albany, this 23rd day of September
two thousand and two.*

A handwritten signature in black ink, appearing to read "Kenneth A. D. S.", written over a horizontal line.

Secretary of State