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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Brewer Financial Services, LLC
(Name of Limited Liability Company)
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida
Please return all correspondence concerning this matter to the following:
Andrew Carava
(Name of Person)
Brewer Financial Services, LLC
(Firm/Company)
200 South Michigan Ave, Floor 21
(Address)
Chicago, IL 60604
(City/State and Zip Code)
For further information concerning this matter, please call:
Andrew Caravaat (312) 896-3930 x 3953
(Name of Person) (Area Code & Daytime Telephone Number)
MAILING ADDRESS: STREET ADDRESS:
Division of Corporations P.O. Box 6327 Division of Corporations Clifton Building
Tallahassee, FL 32314 Canton Bunding 2661 Executive Center Circle Tallahassee, FL 32301
Enclosed is a check for the following amount: \$\sum_{125.00}\$ \text{Filing Fee} \text{\$\sum_{130.00}\$ Filing Fee & } \text{\$\sum_{155.00}\$ Filing Fee & } \text{\$\sum_{160.00}\$ Filing Fee, Certificate } \text{Certificate of Status} \text{Certified Copy} \text{of Status & Certified Copy}



January 31, 2008

ANDREW CARAVA 200 SOUTH MICHIGAN AVENUE, FLOOR 21 CHICAGO, IL 60604

SUBJECT: BREWER FINANCIAL SERVICES, LLC

Ref. Number: W08000005408

We have received your document for BREWER FINANCIAL SERVICES, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The LLC cannot serv as it owns Registered Agent designate an individual or another active Corporation

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6067.

Letter Number: 808A00006659

Neysa Culligan Document Specialist

Division of Cornerations - P.O. ROX 6397 -Tallahassae Florida 39314

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

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

1. Brewer Financial	Services, LLC. ed Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
(Name of Poreign Limi	ed Liability Company; must include "Limited Liability Company, "L.L.C.," or "LLC.")
	rnate name adopted for the purpose of transacting business in Florida and attach a copy of the written taging members adopting the alternate name. The alternate name must include "Limited Liability"
_{2.} Illinois	3.
(Jurisdiction under the law ocompany is organized)	f which foreign limited liability (FEI number, if applicable)
4. 06/08/04 (Date of Org	nization) 5. perpetual (Duration: Year limited liability company will cease to exist or "perpetual")
6. <u>N/A</u>	TAIS 8
(Sec	ate first transacted business in Florida, if prior to registration.) sections 608.501& 608.502 F.S. to determine penalty liability)
7. 200 South Michi	
Chicago, IL 606)4 mg = [1]
	(Street Address of Principal Office)
8. If limited liability com	pany is a manager-managed company, check here
9. The name and usual b	siness addresses of the managing members or managers are as follows:
HDAM ERIC	KSON 200 S. Wichigan ANE, 215T FLOOR
STEVEN BIRE	NER CHICAGO, IL 1001004
the jurisdiction under the law of	cate of existence, no more than 90 days old, duly authenticated by the official having custody of records in which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a roath of the translator must be submitted.)
11. Nature of business or	purposes to be conducted or promoted in Florida:
NASD Registered	brokerage firm conducting retail investment related business
Sig	nature of a member or an authorized representative of a member.

Typed or printed name of signee

(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.)

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

of 4' NA Correctors

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:	
Brewer Financial Services, LLC.	
If name unavailable, the alternate name to be used in the state of Florida is:	
2. The name and the Florida street address of the registered agent and office are:	08 FEB 1 SECRET
Brock Catronio	野巴
(Name)	B AN OF
433 Plaza Real STE. 275	8: 50 F-STATI F-LORI
Florida Street Address (P.O. Box NOT ACCEPTABLE)	ATE JRIDA
Boca Raton, 33432	
City/State/Zip	-
Having been named as registered agent and to accept service of process for the above s liability company at the place designated in this certificate, I hereby accept the appointing agent and agree to act in this capacity. I further agree to comply with the provisions of relating to the proper and complete performance of my duties, and I am familiar with a obligations of my position as registered agent as provided for in Chapter 608, Florida S (Signature)	ment as registered fall statutes nd accept the

\$ 100.00 Filing Fee for Application

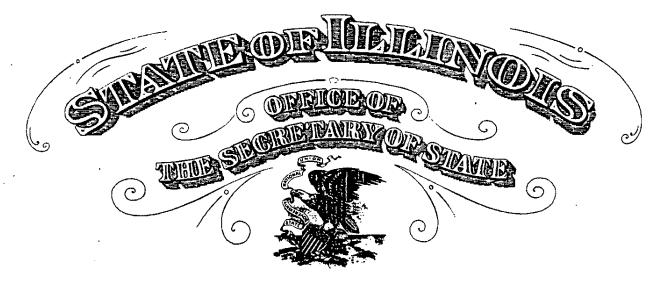
\$ 30.00 Certified Copy (optional)

\$ 25.00 Designation of Registered Agent

5.00 Certificate of Status (optional)

File Number

0120533-1



To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that

BREWER FINANCIAL SERVICES, LLC, HAVING ORGANIZED IN THE STATE OF ILLINOIS ON JUNE 08, 2004, APPEARS TO HAVE COMPLIED WITH ALL PROVISIONS OF THE LIMITED LIABILITY COMPANY ACT OF THIS STATE, AND AS OF THIS DATE IS IN GOOD STANDING AS A DOMESTIC LIMITED LIABILITY COMPANY IN THE STATE OF ILLINOIS.



Authentication #: 0802900454

Authenticate at: http://www.cyberdriveillinois.com

In Testimony Whereof, I hereto set

my hand and cause to be affixed the Great Seal of the State of Illinois, this 29TH

day of JANUARY

A.D

2008

Desse White

SECRETARY OF STATE