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J. BRYAN

DEC - 3 2008

**EXAMINER** 

#### **COVER LETTER**

TO:

TO: Registration Section Division of Corporations	
SUBJECT: Stott Balice Strategies (Name of Limited	d Liability Company)
The enclosed "Application by Foreign Limited Liabil Florida," Certificate of Existence, and check are submliability company to transact business in Florida	ity Company for Authorization to Transact Business in nitted to register the above referenced foreign limited
Please return all correspondence concerning this matt	er to the following:
Lois A. Scott	08 OF CORES
(Name	of Person)
Scott Balice Strat	egies, uc Company)
20 N. Wacker Dr.	Ste 2200 ddress)
Chicago, IL 6060 (City/State	and Zip Code)
For further information concerning this matter, please	call:
Lois A. Scott (Name of Person)	at (312) 263 - 7900 (Area Code & Daytime Telephone Number)
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	TREET ADDRESS: Division of Corporations Clifton Building 661 Executive Center Circle Callahassee, FL 32301
Enclosed is a check for the following amount:  \$\Bigsim \mathbb{\text{\$125.00 Filing Fee}} \Bigsim \mathbb{\text{\$130.00 Filing Fee}} \& Certificate of Sta	\$155.00 Filing Fee & \$160.00 Filing Fee, Certificate tus Certified Copy of Status & Certified Copy

### 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: Strategies, LLC

lame of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C.," "LLC.") 2. State of Illinois
(Jurisdiction under the law of which foreign limited liability (Duration: Year limited liability company will cease to exist or "perpetual") (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) 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: and Dean Balice N. Wacker Dr. Ste 2200 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: Capital Maiket

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.)

Strategies and debt Management, financial consulting, privatization.

analysis and transactions, Swap and der reative advisory services, Investment
ement and

management and

arbitrage rebate.

## 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:	
Scott Balice Strategies, LLC	<del></del>
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:	
NRAT Services Inc. (Name)	OB DCC.
2731 Executive Park Dr., Ste 4 Florida Street Address (P.O. Box NDT ACCEPTABLE)	-2 AHII:
Weston FL 33331 City/state/Zip	1: 39

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. Florida Statutes.

wanta Mahany as ther. (Signature)

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

File Number

0088043-4



#### To all to whom these Presents Shall Come, Greeting:

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

SCOTT BALICE STRATEGIES, LLC, HAVING ORGANIZED IN THE STATE OF ILLINOIS ON MARCH 14, 2003, 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.



the State of Illinois, this day of NOVEMBER

A.D.

In Testimony Whereof, I hereto set

**25TH** 

my hand and cause to be affixed the Great Seal of

2008

Authentication #: 0833001936

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

Jesse White

SECRETARY OF STATE