

M14000006417

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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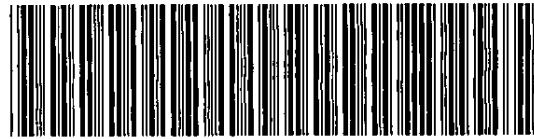
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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2014 SEP -9 AM 9: 10  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

N Gulligan SEP 10 2014



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 290349 4336650

AUTHORIZATION :

COST LIMIT : \$ 125.00

ORDER DATE : September 9, 2014

ORDER TIME : 3:59 PM

ORDER NO. : 290349-005

CUSTOMER NO: 4336650

FOREIGN FILINGS

NAME: VIRTUS TRUST USA, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

       CERTIFIED COPY  
XX        PLAIN STAMPED COPY  
       CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Courtney Williams -- EXT# 62935

EXAMINER: \_\_\_\_\_

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

*IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A  
FOREIGN LIMITED LIABILITY COMPANY TO TRANSACTION BUSINESS IN THE STATE OF FLORIDA:*

1. VIRTUS TRUST USA, LLC

(Name 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. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC.")

2. SD

(Jurisdiction under the law of which foreign limited liability company is organized)

3. \_\_\_\_\_

(FEI number, if applicable)

4. \_\_\_\_\_

(Date first transacted business in Florida, if prior to registration.)  
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 701 Brickell Avenue, Suite 1480, Miami, FL 33131

(Street Address of Principal Office)

6. 701 Brickell Avenue, Suite 1480, Miami, FL 33131

(Mailing Address)

7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

Anthony Perea, Managing Member

701 Brickell Avenue, Suite 1480, Miami, FL 33131

8. 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)

/s/ Anthony Perea

Signature of an authorized person

(In accordance with section 605.0203, F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any 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.)

Anthony Perea

Typed or printed name of signee

2014 SEP - 9 AM 9:10  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

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

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), 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:

**South Dakota as an LLC**

If unavailable, the alternate to be used in the state of Florida is:

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

**Corporation Service Company**

(Name)

**1201 Hays Street**

Florida Street Address (P.O. Box NOT ACCEPTABLE)

**Tallahassee**

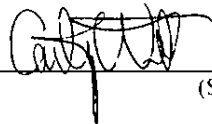
**32301**

**FL**

City/State/Zip

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TALLAHASSEE, FLORIDA

*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 605, Florida Statutes.*



**Asst. VP**

(Signature)

\$ 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 South Dakota



## OFFICE OF THE SECRETARY OF STATE Certificate of Existence Limited Liability Company

ORGANIZATIONAL ID# DL019480

I, **Jason M. Gant**, Secretary of State of the State of South Dakota, do hereby certify that VIRTUS TRUST USA, LLC was duly organized under the laws of this state on August 03, 2009 for a perpetual term of existence.

I, further certify that said limited liability company has complied with the laws of this State relative to the formation of limited liability companies of its kind and is now a regularly and properly organized and existing limited liability company under the laws of this State and is in good standing, as shown by the records of this office. The annual report required by law has been filed with our office and articles of termination have not been filed.

This certificate is not to be construed as an endorsement, recommendation, or notice of approval of the limited liability company's financial condition or business activities and practices. Such information is not available from this office.

**Validation Number:** 1599605069

Use this number to verify the certificate as legitimate via the South Dakota Secretary of State website: [sdsos.gov](http://sdsos.gov)

**IN TESTIMONY WHEREOF,** I have hereunto set my hand and affixed the Great Seal of the State of South Dakota, at Pierre, the Capital, this September 09, 2014.

**Jason M. Gant**  
Secretary of State



Certificate ID: 4763