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COVER LETTER

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ENTITY NAME: Great Lakes Advisors, LLC

CK # + 16772

AMOUNT: 155⁰⁰ (this filing)

PLEASE FILE THE ATTACHED AND RETURN:

☐ PLAIN COPY

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PLEASE CONTACT TINA AT 850-508-1891 FOR
FURTHER INFORMATION ON THIS MATTER.

THANK YOU!

TINA GOFF, PRESIDENT

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Great Lakes Advisors, 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:

Stacy A. Rankin

Name of Person

Wintrust Financial Corporation

Firm/Company

9700 West Higgins Road, 8th Floor

Address

Rosemont, IL 60018

City/State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Stacy A. Rankin

Name of Contact Person

at (**847**)

Area Code

939-9000

Daytime Telephone Number

MAILING ADDRESS:

Division of Corporations
Registration Section
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:

Division of Corporations
Registration Section
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Enclosed is a check for the following amount:

☐ \$125.00 Filing Fee

☐ \$130.00 Filing Fee &
Certificate of Status

☒ \$155.00 Filing Fee &
Certified Copy

☐ \$160.00 Filing Fee, Certificate
of Status & Certified Copy

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. Great Lakes Advisors, 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. Delaware

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

3.

(FBI number, if applicable)

4. 10/01/2013

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

5. 100 Main Street, Suite 301

Safety Harbor, FL 34695

(Street Address of Principal Office)

6. 100 Main Street, Suite 301

Safety Harbor, FL 34695

(Mailing Address)

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TALLAHASSEE, FLORIDA

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

See Exhibit A attached hereto and made a part hereof.

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)



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.)

Thomas P. Zidar, Manager

Typed or printed name of signee

**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:

Great Lakes Advisors, LLC

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

NA

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

Registered Agent Solutions, Inc.

(Name)

155 Office Plaza Dr., Suite A

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

Tallahassee

FL 32301

City/State/Zip

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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.

Vonya Gideon, Asst. Sec.
(Signature)

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

EXHIBIT A

TO THE

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY

FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

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

<u>Name</u>	<u>Title</u>	<u>Address</u>
Thomas P. Zidar	Manager	222 S. Riverside Plaza, Ste 2800, Chicago IL 60606
Edward Calkins	Manager	222 S. Riverside Plaza, Ste 2800, Chicago IL 60606
Paul Carlisle	Manager	222 S. Riverside Plaza, Ste 2800, Chicago IL 60606
Jim W. Croft PhD	Manager	222 S. Riverside Plaza, Ste 2800, Chicago IL 60606
Marla F. Glabe	Manager	222 S. Riverside Plaza, Ste 2800, Chicago IL 60606
Bert A. Getz	Manager	222 S. Riverside Plaza, Ste 2800, Chicago IL 60606
Scott K. Heitmann	Manager	222 S. Riverside Plaza, Ste 2800, Chicago IL 60606
Thomas R. Kiley	Manager	222 S. Riverside Plaza, Ste 2800, Chicago IL 60606
John S. Lillard	Manager	222 S. Riverside Plaza, Ste 2800, Chicago IL 60606
Stephen Rost	Manager	222 S. Riverside Plaza, Ste 2800, Chicago IL 60606
Timothy Schlindwein	Manager	222 S. Riverside Plaza, Ste 2800, Chicago IL 60606
Stanley R. Weinberger	Manager	222 S. Riverside Plaza, Ste 2800, Chicago IL 60606

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TALLAHASSEE, FLORIDA

Delaware

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The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "GREAT LAKES ADVISORS, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTIETH DAY OF MARCH, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "GREAT LAKES ADVISORS, LLC" WAS FORMED ON THE EIGHTH DAY OF JANUARY, A.D. 2008.

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

4485907 8300

150388927

You may verify this certificate online
at corp.delaware.gov/authver.shtml




Jeffrey W. Bullock, Secretary of State
AUTHENTICATION: 2220177

DATE: 03-20-15