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To:

Division of Corporations

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Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 : (850)205-8842 Pnone : (850)878-5363 Fax Number

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### Foreign Limited Liability Company Pricewaterhousecoopers Advisory Product Sales LLC

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#### COVER LETTER

		opers Advisory Product Sale	as LLC		•	
SUBJECT: _		Name of	Limited Liability C	Company	and the second	
The enclosed ' Existence, and	'Application by For	roign Limited Liability Comed to register the above refer	pany for Authoriza enced foreign limit	tion to Tra ed liability	unsact Business in Florida;" C company to transact busines	ertificate d s in Florid
lease return a	ill correspondence	concerning this matter to the	following:			
	Jackeline Marr	oquin				
	<del>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</del>	N	ame of Person	<del></del>	·	
	Pricewaterhou	scCoopers LLP				
	Firm/Company					
	300 Madison A	Avenue				•
	Address					
	New York, Ne	w York 10017				
	<del></del>	City/S	itate and Zip Code		· · · · · · · · · · · · · · · · · · ·	
	jackeline marroc	noo.com			·	
	<del></del>	E-mail address: (to be use	d for future annual	report not	tfication)	
For further infi	ormation concerning	g this matter, please call:				
Jack	eline Marroquin		646 at (	471.11		
	Name	of Contact Person	Area Code	Day	time Telephone Number	
Divis Regis P.O. 1	LING ADDRESS: ion of Corporation tration Section Box 6327 hassee, I'L 32314			Division Registrat Clifton B 2661 Exe	ADDRESS: of Corporations ion Section uilding cutive Center Circle ioe, FL 32301	
Enclosed is a c	sheck for the follow 25.00 Filing Fee	ring amount:  13 \$130,00 Filing Fee & Certificate of Status	Cartified Copy	g Fec &	☐ \$160.00 Filing Fee, Cert of Status & Certified Copy	

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

IN COMPILANCE WITH SECTION 603,0902, FLORIDA STATUTIS, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA. PricewaterhouseCoopers Advisory Product Sales LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "L.C." (If name unavailable, enter altornate manie adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C," or "LLC.") DE. (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized). (Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability) 300 Madison Avenue, New York, NY 10017 (Street Address of Principal Office) 300 Madison Avenue, New York, NY 10017 (Mailing Address) 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) CT Corporation System Name: 1200 South Pine Island Road Office Address: **Piantation** (City) Registered agent's acceptance: Having been named as registered agent and to accept service of process for the above stated limited liability company at the place dasignated in this application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

All VIVA Allegand on the provision of the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent. RALVINA AMENTA-GRAY Copporation System REDUCEL ASSISTANT SECRETARY (Registered agent's signature) 8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: SEE ATTACHED 9. Attached is a 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. (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 This document is executed in accordance with section 605,0203 (1) (b), Florida Statutes. 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.

Typed or printed name of signee

Patricia Brandt

19542080845 From: Ranae McGraw

## Entity Name: PricewaterhouseCoopers Advisory Product Sales LLC

Brandt, Patricia	Secretary	300 Madison Avenue, New York, 10017
D'Alessandro, Maria	Assistant Vice President	401 Broadhollow Rd, Melville, NY 11747
Gattone, Joseph R.	President and Treasurer	1 N Wacker Dr, Chicago, IL 80606
Osdoby, Jaci Miller	Vice President	401 Broadhollow Rd, Melville, NY 11747

16 OCT 18 AH 9: 25

# <u>Delaware</u>

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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "PRICEWATERHOUSECOOPERS ADVISORY

PRODUCT SALES 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 SEVENTEENTH DAY OF

OCTOBER, A.D. 2016.

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

5756583 8300 SR# 20166225579

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

Jeet'rey W. Studiaca, Secretary of State

Authentication: 203167967

Date: 10-17-16