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(Re	equestor's Name)	
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PICK-UP	MAIT	MAIL
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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K. SALY APR 2 6 2018 CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

	ACCOUNT NO. : I2000000195	
	REFERENCE : 174269 7766754	
	AUTHORIZATION: Symulocle man	
	COST LIMIT : \$125/00	
ODDED DAME	April 20 2010	
ORDER DATE :	April 20, 2018	
ORDER TIME :	11:19 AM	
ORDER NO. :	174269-005	
CUSTOMER NO:	7766754	
		
	FOREIGN FILINGS	
NAME:	MACQUARIE COMMODITIES TRADING US, LLC	

XXXX QUALIFICATION (TYPE: <u>LL</u>)
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING
CONTACT PERSON: Roxanne Turner EXT# 62969
EXAMINER:

COVER LETTER

то:		ation Section n of Corporatio	ns			
SUBJE	~~	•	dities Trading US, LLC			
SOBJIN	C1		Name of	Limited Liability (Company	
The enc Existence	losed "A ce, and cl	pplication by For	reign Limited Liability Com ed to register the above refer	pany for Authoriza enced foreign limit	tion to Tra led liability	ansact Business in Florida," Certificate of y company to transact business in Florida.
Please re	eturn all	correspondence	concerning this matter to the	following:		
		Diana Delgado				
			N	ame of Person		
		Macquarie Cor	nmodities Trading US, LLC			
			F	irm/Company	······	
		125 W.55th St	reet			
				Address		
		New York, NY	10019			
			City/S	tate and Zip Code		
	-		E-mail address: (to be use	d for future annual	report not	ification)
For furt	her infor	mation concerning	g this matter, please call:			
	Diana I	Delgado		212 at (231-10	00
		Name o	of Contact Person	Area Code	Day	time Telephone Number
	Divisio	NG ADDRESS: n of Corporation ation Section			Division	FADDRESS: of Corporations ion Section
	P.O. Bo Tallaha	ox 6327 ssee, FL 32314				uilding ceutive Center Circle see, FL 32301
Enclose		eck for the follow .00 Filing Fee	ving amount: ☐ \$130.00 Filing Fee & Certificate of Status	☐ \$155.00 Filir Certified Copy	ng Fee &	☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy

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

IN COMPLIANCE 1971H SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

-	(Name of Foreign	Limited Liability Company; must include "Limite	ed Liabilit	y Company," "L.L.C.," or "LLC	. }
If no	me unavailable, enter alternate n	ame adopted for the purpose of transacting business in Flo	orida, The o	itemate name must include "Limited I	Liability Company," "L.L.C," or "L.L.C.")
, E	elaware		2	81-5474382	
<u>-</u>		tich foreign limited liability company is organized)	3.		imber, if applicable)
4		(Date first transacted business in Florida, if prior to (See sections 605,0904 & 605,0905, F.S. to determ	reparation	L)	
_	125 W. 55th St	(See sections 003,0904 & 003,0905, F,S, to beterm		125 W. 55th St	js - 6
٠	(Street Address of I	rincipal Office)	6.	(Mailing A	ddress)
_	New York, NY 10019			New York, NY 10019	
_					77 /
7. 1	Name and street addres	s of Florida registered agent: (P.O. Box	NOT:	acceptable)	11.10
	Name:	Corporation Service Company			55.00
	Name.				38
	Office Address:	1201 Hays Street			₽ ₹
		Tallahassee		, Florida <u>32301</u>	
		(City)		(Zip s	rada)
Ha des to c	ignated in this applica omply with the provisi	tance: gistered agent and to accept service of tion, I hereby accept the appointment a tions of all statutes relative to the proper s of my pesition as registered agent	is regist	for the above stated limit ered agent and agree to a	ed liability company at the place ct in this capacity. I further agre y duties, and I am familiar with Roxanne Turner
Ha des to c	ving been named as re ignated in this applica omply with the provisi	tance: gistered agent and to accept service of tion, I hereby accept the appointment a tions of all statutes relative to the proper to of my position as registered agent Corporation Service Company By:	s register and co	for the above stated limit ered agent and agree to a	ed liability company at the place ct in this capacity. I further agre v duties, and I am familiar with
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Hades to Cand 8.	oing been named as reignated in this applicationally with the provise accept the obligation. The name, title or capatite or Capacity: Manager Manager	tance: gistered agent and to accept service of tion, I hereby accept the appointment at ions of all statutes relative to the proper is of my position as registered agent. Corporation Service Company. By: (Registered agent's acity and address of the person(s) who have and Address: Nicholas O'Kane 125 W. 55th St. 22nd FL New York, NY 10019	signature) as/have Ti	for the above stated limit ered agent and agree to a mplete performance of medical manage is/are itle or Capacity:	ed liability company at the place ct in this capacity. I further agricy duties, and I am familiar with Roxanne Turnel Asst. Vice President: Name and Address:
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Hades to cand	oing been named as reignated in this applicationally with the provisionally accept the obligation. The name, title or capatite or Capacity: Manager Manager See attachments if necessattached is a certificate sediction under the law the translator must be second.	tance: gistered agent and to accept service of tion, I hereby accept the appointment at tions of all statutes relative to the proper of one of all statutes relative to the proper of th	duly au te is in a	for the above stated limit ered agent and agree to a mplete performance of manage is/are authority to manage is/are itle or Capacity: thenticated by the official a foreign language, a transity, Florida Statutes. I am away.	ed liability company at the place of in this capacity. I further agree by duties, and I am familiar with Roxanne Turner Asst. Vice Preside Asst. Vice Preside : Name and Address: having custody of records in the lation of the certificate under oath ware that any false information

Typed or printed name of signee

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "MACQUARIE COMMODITIES TRADING US, 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 APRIL, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "MACQUARIE COMMODITIES TRADING US, LLC" WAS FORMED ON THE TWENTY-SECOND DAY OF FEBRUARY, A.D. 2017.

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

FILED

18 APR 25 AM 8: 38

SECRETARY OF STATE
AND ASSOCIATION OF STATE

AND ASSOCIATION OF STATE

TAIL AND SECRET FLORIDA



Authentication: 202549587

Date: 04-20-18