HPMW)2170

(Re	equestor's Name)	
(Ac	idress)	
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(Ci	y/State/Zip/Phone	· #)
PICK-UP	☐ WAIT	MAIL.
(Bi	siness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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FLORIDA DEPARTMENT OF STATE Division of Corporations

December 18, 2019

CORPORATE ACCESS, INC.

SUBJECT: ALLIANZ GLOBAL INVESTORS U.S. LLC

Ref. Number: W19000109709

Corrected

We have received your document for ALLIANZ GLOBAL INVESTORS U.S. LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to section 607.1502(4), 617.1502(4) or 605.0904(7), Florida Statutes, this entity is liable for a civil penalty of at least \$500 but not more than \$1000 for each year this entity transacted business or conducted its affairs in Florida prior to qualification. In addition to this civil penalty, the appropriate annual report fees that would have been due this office had the entity qualified the year it began operations in this state are also due. The amount due this office to cover both annual report(s) and penalty fees is \$777.50.

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Tacarri K Glass Regulatory Specialist II

Letter Number: 119A00025700

2619.0***: 23 | A510: 01

CORPORAT	E
ACCESS,	_

When you need ACCESS to the world

INC.

236 East 6th Avenue. Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666, Fax (850) 222-1666

	PIC	CK UP: <u>12/23/2019</u>	
	CERTIFIED COPY		
X	РНОТОСОРУ		
	CUS		
X	FILING	FOREIGN	
	ALLIANZ GLOBAL IN		
(CORPORATE NAME AND DOC	UMENI#)	
(CORPORATE NAME AND DOC	UMENT #)	
(CORPORATE NAME AND DOC	UMENT #)	2019 0
	CORPORATE NAME AND DOC	UMENT #)	22
			5.
(CORPORATE NAME AND DOC	UMENT #)	
-	CORPORATE NAME AND DOC	UMENT #)	

COVER LETTER

	Registration Section Division of Corporatio	ns			
SUBJECT	Allianz Giobal Inve	estors U.S. LLC			
		Name of	Limited Liability	Company	_
The enclos Existence,	sed "Application by Fo and check are submitted	reign Limited Liability Comed to register the above refer	pany for Authoriz enced foreign limi	ation to Transact Business in Florida, ited liability company to transact busi	" Certificate of ness in Florida.
Please retu	ım all correspondence	concerning this matter to the	following:		
	Kellie Davidse	on			
		N	ame of Person		-
	Allianz Asset I	Management of America L.F).		
		F	inn/Company		-
	650 Newport C	Center Drive			
			Address		-
	Newport Beacl	n, CA 92660			
		City/S	tate and Zip Code		-
	kellic.davidson@	Ballianzam.com			
		E-mail address: (to be use	d for future annual	report notification)	•
For further	information concernin	g this matter, please call:			
К	Cellie Davidson		949 at (219-2621	21
	Name o	of Contact Person	Area Code	Daytime Telephone Number] 616
D Re P.	IAILING ADDRESS: ivision of Corporations egistration Section O. Box 6327 allahassee, FL 32314			STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	2019 DEC 23 (1510: 0)
Enclosed is	a check for the follow				Ü.
	\$125.00 Filing Fee	☐ \$130.00 Filing Fee & Certificate of Status	□ \$155.00 Filin Certified Copy	g Fee & \$\sum \$\\$160.00 Filing Fee, Co of Status & Certified Cop	

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

IN COMPLIANCE WITH 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 "L	Limited Liability Company," "L.L.C.," or "LI	.C.")
elt name unavailable, enter alternate r	name adopted for the purpose of transacting business	in Florida. The alternate name must melude "Limite	ed Liability Company," "L.L.C." or "LLC")
7 Delaware		3. 01-0645160	, , ,
(Junsdiction under the law of w	huch foreign limited liability company is organized)		number, if applicable)
4 April 1, 2017			
	(Date first transacted business in Florida, if pr (See sections 605,0904 & 605,0905, F.S. to d	nor to registration.) letermine negativ (inhibity)	
5 1633 Broadway		6. 1633 Broadway	
(Street Address of I	Principal Office)		; Address)
New York, NY 10019		New York, NY 10019	
 Name and <u>street addres</u> Name: 	ss of Florida registered agent; (P.O. Registered Agent Solutions, Inc.	Box NOT acceptable)	
Office Address:	155 Office Plaza Drive, Suite A		
	Tallahassee	, Florida <u>32301</u>	
Registered agent's accep	(City)		p code)
8. The name title or cana		Mackenzie Hart, Assistant S	ecretary ———
		O has/have authority to manage ic/es.	A. I
Title or Cupacity:	Name and Address:	o has/have authority to manage is/are Title or Capacity:	e: Name and Addréss:
Title or Cupacity: Director	Name and Address:		
Title or Capacity:		Title or Capacity:	Name and Address:
Title or Capacity:	Name and Address: JP Vicente	Title or Capacity:	Name and Address:
Title or Capacity:	Name and Address: JP Vicente 122! Brickell Ave、舞り	Title or Capacity:	Name and Address:
Title or Capacity:	Name and Address: JP Vicente 122! Brickell Ave、舞り	Title or Capacity:	Name and Address:
Title or Capacity:	Name and Address: JP Vicente 122! Brickell Ave、舞り	Title or Capacity:	Name and Address:
Title or Cupacity: Director	Name and Address: JP Vicente 122! Brickell Ave、事 9 Miami, FL 33131	Title or Capacity:	Name and Address:
Title or Cupacity: Director Use attachments if necess	Name and Address: JP Vicente 122! Brickell Ave., # 9 Miami, FL 33131	Title or Capacity:	Name and Address:
Title or Cupacity: Director Use attachments if necess Attached is a certificate arisdiction under the law of	Name and Address: JP Vicente 122! Brickell Ave. 本 9 Miami, FL 33131 sary) of existence, no more than 90 days of which it is organized. (If the certifi	Title or Capacity:	Name and Address:
Title or Cupacity: Director Use attachments if necess Attached is a certificate arisdiction under the law of the translator must be su This document is executed.	Name and Address: JP Vicente 1221 Brickell Ave. # 9 Miami, FL 33131 sary) of existence, no more than 90 days of which it is organized. (If the certification in accordance with section 605.0)	Title or Capacity: 100 old, duly authenticated by the official icate is in a foreign language, a trans	having custody of records in the slation of the certificate under oath
Title or Cupacity: Director Use attachments if necess Attached is a certificate arisdiction under the law of the translator must be su 0. This document is executed.	Name and Address: JP Vicente 122! Brickell Ave. 本 9 Miami, FL 33131 sary) of existence, no more than 90 days of which it is organized. (If the certification)	Title or Capacity: 100 old, duly authenticated by the official icate is in a foreign language, a trans	having custody of records in the slation of the certificate under oath
Title or Cupacity: Director Use attachments if necess Attached is a certificate or institution under the law of the translator must be sure. This document is executionally in a document to	Name and Address: JP Vicente 1221 Brickell Ave. # 9 Miami, FL 33131 sary) of existence, no more than 90 days of which it is organized. (If the certification in accordance with section 605.0)	Title or Capacity: 100 old, duly authenticated by the official icate is in a foreign language, a trans	Name and Address:

Page 1



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

DELAWARE, DO HEREBY CERTIFY "ALLIANZ GLOBAL INVESTORS U.S. 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 NINTH DAY OF DECEMBER, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ALLIANZ GLOBAL INVESTORS U.S. LLC" WAS FORMED ON THE FIRST DAY OF JULY, A.D. 2001.

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

2019 D: : 23 F: : 10: 11



Authentication: 204171680

Date: 12-09-19

3409653 8300 SR# 20198526170

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