

M20000004409

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

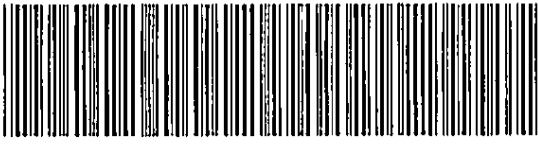
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2020 MAY 11 PM 9:23

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INTERNET FILING SYSTEM
FLORIDA

T GLASS

MAY 12 2020

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 284990 8105220

AUTHORIZATION

COST LIMIT \$ 160,000

ORDER DATE : May 8, 2020

ORDER TIME : 9:22 AM

ORDER NO. : 284990-005

CUSTOMER NO: 8105220

FOREIGN FILINGS

NAME: CTC TRADING GROUP, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY
 PLAIN STAMPED COPY
XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Kadesha Roberson -- EXT# 62980

EXAMINER: _____

2020/05/11 11:09:23

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: CTC Trading Group, 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:

Tamara Crowe

Name of Person

CTC Trading Group, LLC

Firm/Company

425 S. Financial Pl., 4th Floor

Address

Chicago, IL 60605

City/State and Zip Code

tamara.crowe@chicagotrading.com

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

For further information concerning this matter, please call:

James Ongena

312

863-8000

at ()

Name of Contact Person

Area Code

Daytime Telephone Number

Mailing Address:

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

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

\$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

2020 FEB 11 11:09:23

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:

1. CTC Trading Group, LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "LLC," 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," "LLC," or "LLC.")

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

3. 27-3972658
(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. 425 S. Financial Pl., 4th Floor
(Street Address of Principal Office)

Chicago, IL 60605

6. 425 S. Financial Pl., 4th Floor
(Mailing Address)

Chicago, IL 60605

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Corporation Service Company


Office Address: 1201 Hays Street

Tallahassee Florida 32301
(City) (Zip code)

RECORDED 11 23 9:23

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 designated 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.


Kodesha Roberson
Asst. Vice President
(Registered agent's signature)

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

Title or Capacity: **Name and Address:**

Manager Name: James Ongena

Member Address: 425 S. Financial P., 4th Fl.

Authorized Chicago, IL 60605

Person _____

Other _____ Other _____

Title or Capacity: **Name and Address:**

Manager Name: Sharon Blaszak

Member Address: 425 S. Financial P., 4th Fl.

Authorized Chicago, IL 60605

Person _____

Other _____ Other _____

Manager Name: Tamara Crowe

Member Address: 425 S. Financial P., 4th Fl.

Authorized Chicago, IL 60605

Person _____

Other _____ Other _____

Manager Name: Adam Bather

Member Address: 425 S. Financial P., 4th Fl.

Authorized Chicago, IL 60605

Person _____

Other _____ Other _____

Manager Name: _____

Member Address: _____

Authorized _____

Person _____

Other _____ Other _____

Manager Name: _____

Member Address: _____

Authorized _____

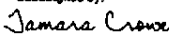
Person _____

Other _____ Other _____

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

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)

10. 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.

DocuSigned by:

 517730188EA74F1

 Signature of an authorized person

Tamara Crowe

 Typed or printed name of signee

2021-11-11 9:23

Delaware

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CTC TRADING GROUP, 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 EIGHTH DAY OF MAY, A.D. 2020.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CTC TRADING GROUP, LLC" WAS FORMED ON THE SIXTEENTH DAY OF NOVEMBER, A.D. 2010.

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

2020 MAY 11 11:09:23




Jeffrey W. Bullock, Secretary of State

4899420 8300

SR# 20203662111

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

Authentication: 202903467

Date: 05-08-20