Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H220002467013)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 : (954)208-0845 Phone : (614)573-3996 Fax Number

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email	Address:		

Foreign Limited Liability Company Citadel Tactical Trading LLC

Certificate of Status	0			
Certified Copy	1			
Page Count	04			
Estimated Charge	\$155.00			

Electronic Filing Menu Corporate Filing Menu

S. FRANKLIN HelpJUL 2 1 2022

To: Page: 3 of 5 2022-07-20 14:34:23 CST 12122023573 From: Lexus Wingo

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

IN COMPILANCE WITH SECTION 605,0002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED DABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

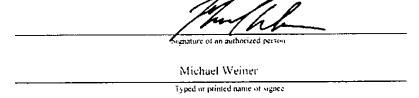
	imied Liability Company, musi include "Limite	d Clability i	company, LLC, or TTC)		
ne unavailable, cater alternate nar	ne adopted for the purpose of transacting business in Fl	oeida The a	ternate name must include "Lumited Liability Company," "L	.t. C," oc"1	
Delaware		,			
Durisdiction under the law of whi	ch foreign limited liabdity company is organized)	٥	(El.) number, (Capplicable)		
 	(Date first transacted business in Florida, if prior to	registration.		23	
	(See sections 605 0904 & 605 0905, F.S. in determ	me penalty li	ability)	22	
Southeast Financial C	l'enter	6	c/o Citadel Enterprise Americas LLC	7022 i 1 20	
et Address of Proncipal Office)				20	
200 S. Biscayne Blvd	4 Suita 2200		Southeast Financial Center		
		_	200 S, Biscayne Blvd , Suite 3300		
				<u>ب</u> اح	
Miami, FL 33131			Miami, FL 33131	\sim	
	official and another on O. Boo	- NCC a			
Name and street address Name: Office Address:	of Florida registered agent: (P.O. Box C T Corporation System 1200 South Pine Island Road	NOT ac	cceptable)		
Name:	C T Corporation System				
Name:	C.T Corporation System 1200 South Pine Island Road Plantation				
Name:	C T Corporation System 1200 South Pine Island Road		, Florida 33324 (Zip code)		
Name: Office Address: gistered agent's accepta ving been named as reg ignated in this applicati comply with the provisio	CT Corporation System 1200 South Pine Island Road Plantation (Civ) ance: istered agent and to accept service of point the appointment	process f		ny at the pl	
Name: Office Address: gistered agent's acceptaing been named as regingled in this applicationally with the provision	CT Corporation System 1200 South Pine Island Road Plantation (Cis) ance: istered agent and to accept service of pion, I hereby accept the appointment ains of all statutes relative to the proper of my position as registered agent.	process f	Florida 33324 (Ap code) or the above stated limited liability compared agent and agree to act in this capacity uplete performance of my duties, and I am	ny at the pl	

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:	Title or Capacity	<u>:</u>	Name and Address:
XIManager	Name: <u>Citadel Advisors LLC</u>	□Manager	Name:	
Member	Address: Southeast Financial Center	☐ Member	Address:	
□Authorized	200 S. Biscayne Blvd., Suite 3300	☐ Authorized		
Person	Miami, FL 33131	Person		
□Other	□Other	_Other		□Other
□Manager	Name:	□Manager	Name:	2 122
□Member	Address:	□Member	Address:	27
□Authorized		☐ Authorized		. 20
Person		Person		
□Other	Other	□Other		□Other
				7
□Manager	Name:	⊒Manager	Name:	
□Member	Address:	□ Member	Address:	
☐Authorized		Authorized		
Person		Person		
□ Other	Other	_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.





Page 1

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

DELAWARE, DO HEREBY CERTIFY "CITADEL TACTICAL TRADING 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 JULY, A.D. 2022.

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

2022 ... 20 Pi 3: 21

e at corp.delaware.gov/authy

Authentication: 203963428

Date: 07-20-22