2021 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 22, 2021
Secretary of State
6739670255CC

DOCUMENT# M11000004786

Entity Name: ALLY INVEST SECURITIES LLC

Current Principal Place of Business:

888 E. LAS OLAS BOULEVARD, SUITE 300
FORT LAUDERDALE, FL 33301

Current Mailing Address:

888 E. LAS OLAS BOULEVARD, SUITE 300
FORT LAUDERDALE, FL 33301 US

FEI Number: 45-4567841

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND RD.
PLANTATION, FL 33324 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent — Date

Authorized Person(s) Detail :

Title	PRINCIPAL OPERATIONS OFFICER	Title	PRINCIPAL FINANCIAL OFFICER
Name	GOODRICH, STEVEN	Name	MARTIN, ALEX M.
Address	888 E. LAS OLAS BOULEVARD, SUITE 300	Address	888 E. LAS OLAS BOULEVARD, SUITE 300
City-State-Zip:	FORT LAUDERDALE FL 33301	City-State-Zip:	FORT LAUDERDALE FL 33301
Title	PRINCIPAL FINANCIAL OFFICER	Title	PRESIDENT
Name	LIETKE, FRANK	Name	LIETKE, FRANK
Address	888 E. LAS OLAS BOULEVARD, SUITE 300	Address	888 E. LAS OLAS BOULEVARD, SUITE 300
City-State-Zip:	FORT LAUDERDALE FL 33301	City-State-Zip:	FORT LAUDERDALE FL 33301
Title	CEO	Title	CHIEF COMPLIANCE OFFICER
Name	DEMMISSIE, LULE I.	Name	SYKES, ROBERT C. C.
Address	888 E. LAS OLAS BOULEVARD, SUITE 300	Address	888 E. LAS OLAS BOULEVARD, SUITE 300
City-State-Zip:	FORT LAUDERDALE FL 33301	City-State-Zip:	FORT LAUDERDALE FL 33301
Title	ASSISTANT SECRETARY	Title	ASSISTANT SECRETARY
Name	ROSTEN, LINDA L.	Name	FRENCH, MARY T.
Address	888 E. LAS OLAS BOULEVARD, SUITE 300	Address	888 E. LAS OLAS BOULEVARD, SUITE 300
City-State-Zip:	FORT LAUDERDALE FL 33301	City-State-Zip:	FORT LAUDERDALE FL 33301

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I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MARY FRENCH AUTHORIZED SIGNOR 04/22/2021

Electronic Signature of Signing Authorized Person(s) Detail — Date

Authorized Person(s) Detail Continued :

Title	ASSISTANT SECRETARY
Name	DANIELS, JOYCE M.
Address	888 E. LAS OLAS BOULEVARD, SUITE 300
City-State-Zip:	FORT LAUDERDALE FL 33301

Title	AUTHORIZED SIGNOR
Name	FRENCH, MARY
Address	888 E. LAS OLAS BOULEVARD, SUITE 300
City-State-Zip:	FORT LAUDERDALE FL 33301

Title	AML COMPLIANCE OFFICER
Name	THOMPSON, CHERYL G.
Address	888 E. LAS OLAS BOULEVARD, SUITE 300
City-State-Zip:	FORT LAUDERDALE FL 33301