

2020 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M11000004786

Entity Name: ALLY INVEST SECURITIES LLC**Current Principal Place of Business:**11605 N COMMUNITY HOUSE RD
3RD FLOOR
CHARLOTTE, NC 28277**Current Mailing Address:**11605 N COMMUNITY HOUSE RD
3RD FLOOR
CHARLOTTE, NC 28277 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	PRESIDENT
Name	DEMMISSIE, LULE
Address	11605 N COMMUNITY HOUSE RD 3RD FLOOR
City-State-Zip:	CHARLOTTE NC 28277

Title	AML COMPLIANCE OFFICER
Name	THOMSON, CHERYL
Address	11605 N COMMUNITY HOUSE RD 3RD FLOOR
City-State-Zip:	CHARLOTTE NC 28277

Title	FINOP
Name	CHIODO, MICHAEL
Address	888 E LAS OLAS BLVD 3RD FLOOR
City-State-Zip:	FORT LAUDERDALE FL 33301

Title	SENIOR DIRECTOR, TRADING
Name	DOMINIC, JOHN
Address	888 E LAS OLAS BLVD 3RD FLOOR
City-State-Zip:	FORT LAUDERDALE FL 33301

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: MICHAEL CHIODO

FINOP

02/28/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date