

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M08000000642

FILED
Apr 12, 2010
Secretary of State

Entity Name: ASCENT FINANCIAL SERVICES, LLC

Current Principal Place of Business:

ONE HOME CAMPUS, MAC# X2401-049
DES MOINES, IA 503280001

New Principal Place of Business:

ONE HOME CAMPUS, MAC# X2401-05W
DES MOINES, IA 503280001

Current Mailing Address:

ONE HOME CAMPUS, MAC# X2401-049
DES MOINES, IA 503280001

New Mailing Address:

ONE HOME CAMPUS, MAC# X2401-05W
DES MOINES, IA 503280001

FEI Number: 26-1480741

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 US

Name and Address of New Registered Agent:

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

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: WELLS FARGO VENTURES, LLC
Address: ONE HOME CAMPUS, MAC X2401-05W
City-St-Zip: DES MOINES, IA 503280001

I hereby certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: KAROLYN BAKER

VP

04/12/2010

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date