2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M02000002437

Entity Name: WELLS FARGO INVESTMENTS, LLC

MINNEAPOLIS, MN 55402

City-St-Zip:

FILED Jan 27, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 420 MONTGOMERY STREET A0101-983 SAN FRANCISCO, CA 94104 **New Mailing Address: Current Mailing Address:** SIXITH & MARQUETTE N9305-173 MINNEAPOLIS, MN 55479 FEI Number: 91-1374280 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 323012525 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 MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: Title: () Change () Addition () Delete BENSUSSEN, V. LAWRENCE Name: Name: 999 3RD AVENUE Address: Address: City-St-Zip: SEATTLE, WA 98104 City-St-Zip: Title: MGR Title: () Delete () Change () Addition PERKEL, RACHEL K Name: Name: Address: 420 MONTGOMERY STREET Address: City-St-Zip: SAN FRANCISCO, CA 94104 City-St-Zip: Title: MGR () Delete Title: () Change () Addition DAGGS, CHARLES W III Name: Name: Address: 420 MONTGOMERY STREET Address: City-St-Zip: SAN FRANCISCO, CA 94104 City-St-Zip: Title: MGR () Delete Title: () Change () Addition Name: WELKER, JAY S Name: 420 MONTGOMERY STREET Address: Address: City-St-Zip: SAN FRANCISCO, CA 94104 City-St-Zip: Title: MGR () Delete Title: () Change () Addition AMADOR, LISA Name: Name: 550 CALIFORNIA STREET Address: Address: City-St-Zip: SAN FRANCISCO, CA 94104 City-St-Zip: Title: () Delete Title: () Change () Addition CAMERANESI, KENNETH Name: Name: Address: 608 2ND AVENUE S. Address:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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.

City-St-Zip:

SIGNATURE: MARGARET WEBER AGEN 01/27/2009