## 2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT # M02000002437

1. Entity Name

CITY-ST-ZIP

## WELLS FAF



| Principal Place of Business                                | Mailing Address 420 MONTGOMERY STREET. A0101-121 SAN FRANCISCO CA 94104 |   |  |  |
|--|---|---|--|--|
| 420 MONTGOMERY STREET. A0101-121<br>SAN FRANCISCO CA 94104 |   |   |  |  |
| 2. Principal Place of Business                             | 3. Mailing Address  |   |  |  |
| Suite, Apt. #, etc.  | Suite, Apt. #, etc.   | _ |  |  |

**FILED** May 23, 2003 8:00 am Secretary of State

05-23-2003 90046 028 \*\*\*\*50.00

| WELLS FARGO INVESTMENTS, LLC   |   |                    |                        |  |  |                         |              |               |               |
|--|---|--------------------|------------------------|--|--|-------------------------|--------------|---------------|---------------|
| Principal Place of Business Mailing Address 420 MONTGOMERY STREET. A0101-121 420 MONTGOMERY STREET. SAN FRANCISCO CA 94104  SAN FRANCISCO CA 94104 |   |                    |                        | 121  |  |                         |              |               |               |
| 2. Principal P   | Place of Business   | 3. Mailing Address | , <del></del> -        |  |  |                         |              |               |               |
| Suite, Apt. #, etc. Suite, Apt. #, etc.  |   |                    |                        | <u> </u>                                       | CHECK HERE IF N  | MAKING CHANGES          |              |               |               |
| City & State City & State  |   | City & State       | · .                    |  | 4. FEI Number  |                         |              | pplied For    | 7             |
| City & State   |   | Only & State       |                        |  | 4. FEI Nulliber  | 91-1374280              | N            | ot Applicable | 1             |
| Zip Country  |   | Zip                | Zip Coun               |  | 5. Certificate of Status Desired S5.00 Additional Fee Required |                         |              |               |               |
|  | 6. Name and Address of Current  | Registered Agent   |                        | Name   | 7. Name and A  | ddress of New Regi      | stered Agent | ·             | 1_            |
| CORPORATION SERVICE COMPANY<br>1201 HAYS STREET<br>TALLAHASSEE FL 32301-2525   |   |                    |                        | P.O. Box Number is                             | Not Acceptable)  |                         |              | }             |               |
|  |   |                    | -                      |  |  |                         |              |               | -             |
|  |   |                    | - 1                    | City   |  | ·                       | FL Zip Coo   | <br>le        | $\frac{1}{1}$ |
|  | named entity submits this statement for<br>tions of registered agent.  Signature, typed or printed name of registered agent a |                    |                        | ed office or register                          | _  | in the State of Florida |              | and accept    |               |
| 7  |   | Make Check Payat   | ole to Flo             | EE IS \$50.00<br>orida Department<br>y 1, 2003 | nt of State  |                         |              |               |               |
| 9.   | MANAGING MEMBE  | <u></u>            | 10.                    |  |  | ADDITIONS/CH            |              |               | ] ू           |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP  | MGR BENSUSSEN, V. LAWRENCE 999 3RD AVENUE SEATTLE WA 98104  | ☐ Delete           |                        | ſ  |  |                         | ☐ Change     | ☐ Addition    | F083 (10/02   |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP  | MGR<br>BRONSTEIN, GREGORY P<br>420 MONTGOMERY STREET<br>SAN FRANCISCO CA 94104  | , Delete           |                        |  |  |                         | ☐ Change     | ☐ Addition    | <u> </u>      |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP  | MGR DAGGS, CHARLES W III 420 MONTGOMERY STREET SAN FRANCISCO CA 94104   | ☐ Delete           |                        | .  |  |                         | ☐ Change     | ☐ Addition    |               |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP  | MGR<br>MOORADIAN, DENNIS J<br>420 MONTGOMERY STREET<br>SAN FRANCISCO CA 94104   | ☐ Delete           |                        | 1  |  |                         | Change       | Addition      |               |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP  | MGR HAYES, WILLIAM P 550 CALIFORNIA STREET SAN FRANCISCO CA 94104   | ☐ Delete           | TITLE<br>NAME<br>STREE | <del></del>                                    |  | . ,                     | ☐ Change     | Addition      | 1             |
| TITLE<br>NAME<br>STREET ADDRESS  | UNITED ON STIME   | ☐ Delete           | TITLE<br>NAME          |  |  |                         | Change       | ☐ Addition    |               |

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:

Daytime Phone #