

2019 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M03000001891

Entity Name: WELLS FARGO ADVISORS INSURANCE AGENCY, LLC

Current Principal Place of Business:

901 E. BYRD STREET
RICHMOND, VA 23219

Current Mailing Address:

901 E. BYRD STREET
RICHMOND, VA 23219

FEI Number: 54-0910269

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 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 MANAGER
Name GACONA, BERNARD
Address 401 SOUTH TRYON
City-State-Zip: CHARLOTTE NC 28202

Title AUTHORIZED PERSON
Name ERNST, DEANNA
Address 301 SOUTH COLLEGE STREET
City-State-Zip: CHARLOTTE NC 28202

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: DEANNA ERNST

AUTHORIZED PERSON

04/25/2019

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date