

**2018 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M1100000873

**FILED**  
**Apr 26, 2018**  
**Secretary of State**  
**CC3500801682**

**Entity Name:** WELLS FARGO COMMODITIES, LLC

**Current Principal Place of Business:**

301 SOUTH COLLEGE STREET  
CHARLOTTE, NC 28288

**Current Mailing Address:**

301 SOUTH COLLEGE STREET  
CHARLOTTE, NC 28288

**FEI Number:** 20-2613189

**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            SECRETARY  
Name            HOOPER, MATTHEW  
Address        301 SOUTH COLLEGE STREET  
City-State-Zip: CHARLOTTE NC 28288

Title            MGR  
Name            BLACK , TROY  
Address        301 SOUTH COLLEGE STREET  
City-State-Zip: CHARLOTTE NC 28288

Title            AUTHORIZED PERSON  
Name            ERNST, DEANNA  
Address        301 SOUTH COLLEGE STREET  
City-State-Zip: CHARLOTTE NC 28288

*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**

**04/26/2018**

Electronic Signature of Signing Authorized Person(s) Detail

Date