F06000007917

(Re	equestor's Name)				
γ					
	ddress)				
(^,	uriess)				
(Ac	ddress)				
(Ci	ty/State/Zip/Phone #				
PICK-UP	☐ WAIT	MAIL			
(Bı	ısiness Entity Name)				
(Do	ocument Number)	<u></u> -			
Certified Copies	_ Certificates of	Status			
Special Instructions to	Filing Officer:				
	_				
		İ			
		;			
Office Use Only					
	,				



700082665987

12/27/06--01021--003 **70.00

ZUDB DEC Z/ PM Z: ZU SECRETARY OF STATE TALLAHASSEE FLORIDA

1. Burch DEC 28 200

COVER LETTER

TO: New Filing Section Division of Corporations	
SUBJECT: First Advisors, Inc.	
	orporation - must include suffix)
Dear Sir or Madam:	
	tion for Authorization to Transact Business in Florida," itted to register the above referenced foreign corporation to
Please return all correspondence concerning thi	s matter to the following:
Cara Brouder	
O	Name of Person)
First Advisors, Inc.	
(I	Firm/Company)
15455 Conway Rd.	
	(Address)
Chesterfield, MO 63017	
(Cit	y/State and Zip code)
For further information concerning this matter,	please call:
Cara Brouder at (636) 537-1040
(Name of Person)	(Area Code & Daytime Telephone Number)
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 Enclosed is a check for the following amount:	MAILING ADDRESS: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314
x\$70.00 Filing Fee \$78.75 Filing Fee & Certificate of Stat	

106 DEC 27 PM 2: 2

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

K	COMPLIANCI EGISTER A FOI First Advisors, I	KEIGN CORPORATION TO TRANSACT	S'. []	TATUTES, THE FOLLOWING IS SUBMIT BUSINESS IN THE STATE OF FLORIDA.	TED TO ALLAI SECRE
1.	(Enter name of c	corporation; must include "INCORPORATEI corp," "Inc," "Co," or "Corp.")	D,	" "COMPANY," "CORPORATION,"	JARY OF ST NASSEE, FLO
	(If name unavail	able in Florida, enter alternate corporate nam	1e	adopted for the purpose of transacting business	
2	Delaware	3	2	36-4260171	Σm
		under the law of which it is incorporated)	٠.	(FEI number, if applicable)	
4.	December 02, 2	005	5	Perpetual	
.,		of incorporation)	•	(Duration: Year corp. will cease to exist or "p	perpetual")
6.	Upon Qualificat	ion			
• •	Chesterfield, MC	(Principal office ad			
		(Current mailing ad		•	
8.	Registered Invest activity for which	stment Advisor offering Assett Management ch corporations may be organized.	aı	nd Fee-Based Planning Services. To engage in a	iny act or
	(Purpose(s) of corporation authorized in home state or	co	ountry to be carried out in state of Florida)	
9.	Name and stree	et address of Florida registered agent: (P.	.C). Box NOT acceptable)	
	Name:	Corporation Service Company			
Of	fice Address:	1201 Hays Street			
		Tallahassee		, Florida 32301	
		(City)		(Zip code)	
		gent's acceptance: ed as registered agent and to accept serv	vie	ce of process for the above stated corporati	ion at the pi

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Corporation Service Company

By:

(Registered agent's signature)

Ann R. Shilling

Assistant Vice President

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and business addresses of officers and/or directors:		
A. DIRECTORS	SEC	2006
Chairman: See attached officers/directors rider		DEC T
Address:	名式	1L 27
	E S	
Vice Chairman	STATU	<u>'</u>
Vice Chairman:	- Dilli	20
Address:		
Director:	<u></u>	
Address:		
		
Director:		
Address:		
B. OFFICERS		
President: See attached officers/directors rider		
Address:		
		
Vice President:		
Address:		
Secretary:		
Address:		
Treasurer:		
Address:		
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or d	irectors.	
13. Sopin Ballimund		
(Signature of Director or Officer listed in number 12 of the application)		
14. Robin Rodermund, Secretary		
(Typed or printed name and capacity of person signing application)		

OFFICERS/DIRECTORS RIDER

FL-Application by Foreign Corporation for Authorization

First Advisors, Inc.

List of Officers

Name: Craig A. Junkins Title: President

Bus. Addr.: 15455 Conway Rd., Chesterfield, MO 63017

Name: Robin Rodermund Title: Secretary

Bus. Addr.: 15455 Conway Rd., Chesterfield, MO 63017

Name: Janice Doza Title: Treasurer

Bus. Addr.: 15455 Conway Rd., Chesterfield, MO 63017

Name: Christy Haedike Title: Chief Compliance Officer

Bus. Addr.: 15455 Conway Rd., Chesterfield, MO 63017

List of Directors

Name: Craig A. Jukins Term: Dec 31, 2009

Bus. Addr.: 15455 Conway Rd., Chesterfield, MO 63017

Name: Christy Haedike Term: Dec 31, 2009

Bus. Addr.: 15455 Conway Rd., Chesterfield, MO 63017

Name: Janice Doza Term: Dec 31, 2009

Bus. Addr.: 15455 Conway Rd., Chesterfield, MO 63017

IOR DEC 27 PM 2: 2

Delaware

PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "FIRST ADVISORS, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE FOURTEENTH DAY OF DECEMBER, A.D. 2006.

2006 DEC 27 PH 2: 20
SECRETARY OF STATE



Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 5277581

DATE: 12-14-06

4045341 8300

061140934