## 2001 UNIFORM BUSINESS REPORT (UBR)

#### May 07, 2001 8:00 am Secretary of State DOCUMENT # F9900003436 1. Entity Name WELLS FARGO BUSINESS CREDIT, INC. 05-07-2001 90053 036 \*\*\*150.00 Principal Place of Business Mailing Address SIXTH & MARQUETTE SIXTH & MARQUETTE MINNEAPOLIS MN 55479 MINNEAPOLIS MN 55479 759091 2. Principal Place of Business 3. Mailing Address Sixth & Marquette DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. MAC# N9312-032 Applied For City & State City & State 4. FEI Number 41-1237652 Minneapolis, MN 55479 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE FL 32301-2525 Zip Code FI 8. 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 (NOTE: Registered Agent signature required when reinstating) DATE Signature, typed or printed name of registered agent and title if applicable. FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) 귯 Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. ☐ Addition PD Delete TITLE Change TITI F NAME NAME MCKINLEY, MARTIN J STREET ADDRESS STREET ADDRESS SIXTH & MARQUETTE See Attachment CITY-ST-ZIP CITY-ST-ZIP MINNEAPOLIS MN 55479 Addition TITLE ☐ Change ☐ Delete TITLE NAME NAME ABRAHAM, ROBERT D STREET ADDRESS STREET ADDRESS 119 WEST 40TH STREET, 10TH FLOOR CITY-ST-7IP CITY-ST-ZIP NEW YORK NY 10018 ☐ Change Addition ☐ Delete TITLE NAME NAME ANDERSON, CYNTHIA LYNN STREET ADDRESS STREET ADDRESS 2460 WEST 26TH AVENUE, C-120 CITY-ST-ZIP CITY-ST-ZIP DENVER CO 80211-8995 ☐ Change ☐ Delete TITLE ☐ Addition TITLE NAME NAME BARBOUR, BRENDA K STREET ADDRESS STREET ADDRESS SIXTH & MARQUETTE CITY-ST-ZIP CITY-ST-ZIP MINNEAPOLIS MN 55479 [7] Change TITLE ☐ Delete TITLE ☐ Addition BATSON, CHARLES H NAME NAME STREET ADDRESS STREET ADDRESS 100 EAST WISCONSIN AVE., SUITE 1400 CITY-ST-ZIP CITY-ST-ZIP MILWAUKEE WI 53202-3799 ☐ Delete ☐ Addition TITLE Change TITLE NAME NAME BAUGH, KENNETH J STREET ADDRESS STREET ADDRESS 2300 LOUISIANA N.E. CITY-ST-7IP CITY-ST-ZIP <u>ALBUQUERQUE NM 87110</u> 13. 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 or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

Heidi A. Zeller, Officerr 4

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