2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #   M00000000026

1. Entity Name

JMS FISHER INVESTMENTS LLC

Principal Place of Business	Mailing Address
3600 SOUTH YOSEMITE STREET, 10TH FLOOR DENVER CO 80237	3600 SOUTH YOSEMITE STREET, 10TH FLOOR DENVER CO 80237

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address	
Suite, Apt. #, etc.	Suite, Apt. #, etc.	
City & State	City & State	**4.** FEI Number **55-2867391** — Applied For / Not Applicable
Zip / Country	Zip / Country	**5.** Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
CORPORATION SERVICE COMPANY **1201 HAYS STREET** **TALLAHASSEE FL 32301**	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

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 _____

Signature, typed or printed name of registered agent and title if applicable.   (NOTE: Registered Agent signature required when reinstating)   DATE

FILE NOW!!! FEE IS $50.00
Make Check Payable to Department of State

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9.	MANAGING MEMBERS / MEMBERS		10.		ADDITIONS / CHANGES		
TITLE	MEMBER/MGR	☐ Delete	TITLE			☐ Change	☐ Addition
NAME	JOHN M. SEVO		NAME				
STREET ADDRESS	3600 S. Yosemite 10TH FL		STREET ADDRESS				
CITY-ST-ZIP	DENVER, CO 80237		CITY-ST-ZIP				
TITLE		☐ Delete	TITLE			☐ Change	☐ Addition
NAME			NAME				
STREET ADDRESS			STREET ADDRESS				
CITY-ST-ZIP			CITY-ST-ZIP				
TITLE		☐ Delete	TITLE			☐ Change	☐ Addition
NAME			NAME				
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NAME			NAME				
STREET ADDRESS			STREET ADDRESS				
CITY-ST-ZIP			CITY-ST-ZIP				

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.

SIGNATURE: _____   5L-01   303-721-000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE   Date   Daytime Phone #