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FILED
Mar 14, 2007 8:00 am
Secretary of State
02-14-2007 90221 047 ****55.00

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # M01000002601

1. Entity Name
RELATED FINANCIAL, LLC

| Principal Place of Business | Mailing Address |
|---|---|
| 1 HOME CAMPUS<br>MAC X2401-049<br>DES MOINES, IA 50328 | 1 HOME CAMPUS<br>MAC X2401-049<br>DES MOINES, IA 50328 |

| 2. Principal Place of Business - No P.O. Box # | 3. Mailing Address |
|---|---|
| 2828 Coral Way | 2828 Coral Way |
| Suite, Apt. #, etc. 208 | Suite, Apt. #, etc. 208 |
| City & State Miami, FL | City & State Miami, FL |
| Zip 33145 Country U.S.A | Zip 33145 Country U.S.A |

01292007 Chg-LLC CR2E083 (12/06)

4. FEI Number 42-1526507 — Applied For / Not Applicable

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<br>1201 HAYS STREET<br>TALLAHASSEE, FL 32301-2525 | Name<br>Street Address (P.O. Box Number is Not Acceptable)<br>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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when re-instating) DATE

**Filing Fee is $50.00**
**Due by May 1, 2007**

**Make check payable to Florida Department of State**

| 9. MANAGING MEMBERS/MANAGERS | | 10. ADDITIONS/CHANGES | |
|---|---|---|---|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | MGRM<br>WELLS FARGO VENTURES, LLC<br>1 HOME CAMPUS, MAC X2401-049<br>DES MOINES, IA 50328<br>☐ Delete | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | ☐ Change ☐ Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | MGRM<br>TRELCOM DEVELOPMENT LTD DBA TRG-WF, LLC<br>2828 CORAL WAY, PENTHOUSE 2<br>MIAMI, FL 33145<br>☒ Delete | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | ☐ Change ☒ Addition<br>MGRM<br>Related Financial, LLC<br>2828 Coral Way, Suite 208<br>Miami, FL 33145 |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | ☐ Delete | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | ☐ Change ☐ Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | ☐ Delete | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | ☐ Change ☐ Addition |
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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:** _____ 02/01/07 305-648-2775
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #

MANAGER