IMITED LIABILITY COMPANY **UNIFORM BUSINESS REPORT (UBR)**

FILED Mar 26, 2002 8:00 am Secretary of State

03-26-2002 90097 004 ****50.00

DOCUMENT #	M01000002840
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1. Entity Name

RAGEN MACKENZIE INVESTMENT SERVICES, LLC

DO	NOT	WRITE	IN	THIS	SPAC	E
	14171	AAIVII I	11.4			-

2. Principal Place of Business	3. Mailing Address	
1000 2nd Avenue	SAME	
Suite, Apt. #, etc.	Suite, Apt. #, etc.	
Suite 3130		
City & State	City & State	
C441- 573	· ·	

Applied For 4. FEI Number Not Applicable 91~1320696 Seattle, Zip Country \$5.00 Additional Country 5. Certificate of Status Desired Fee Required 98104 USA

DO NOT WRITE IN THIS SPACE

	7.	Name and Ad	dress of Current	Registered Agent
Name	Corpo	ration	Service	Company

Street Address (P.O. Box Number is Not Acceptable)

1201 Hays Street

City <u>Tallahassee</u>

Zip Code

32301

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.
2 CICNIATUDE	
SIGNATURE	DATE

FEE IS \$50.00 Make Check Payable to Department of State DUE BY MAY 1

	DU	E BY MAY 1	
9.	MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO,CFO, Director, Treas,MGR Jon Henry Meiners 1000 2nd Avenue, Suite 3130 Seattle, WA 98104	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	President, Director, MGR Michael Meiners 1000 2nd Avenue, Suite 3130 Seattle, WA 98104	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director, MGR V. Lawrence Bensussen 999 3rd Avenue Seattle, WA 98104	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DO NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director, MGR James P. Kerr 399 3rd Avenue Seattle, WA 98104	TITLE NAME STREET ADDRESS CITY-ST-ZIP	IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director MGR Robert J. Mortell 999 Third Avenue Seattle, WA 98104	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	

11. Thereby 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.

Jon H. Meiners D NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE