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(Document Number)
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G. MCLEOD MAY - 8 2012

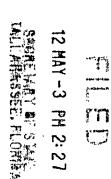
EXAMINER



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COVER LETTER

TO:

Registration Section

Division of Corporations
SUBJECT: CU Investment Solutions LLC Name of Limited Liability Company
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida
Please return all correspondence concerning this matter to the following:
Math Jackson Name of Person
CU Investment Solutions LLC Firm/Company
8500 W 110th St # 650
Overland Park K5 66210 City/State and Zip Code
E-mail/address: (to be used for future annual report notification)
For further information concerning this matter, please call:
MAH Jackson at (113) 912-5240 Name of Person Area Code & Daytime Telephone Number
MAILING ADDRESS:STREET ADDRESS:Division of CorporationsDivision of CorporationsRegistration SectionRegistration SectionP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle Tallahassee, FL 32301
Enclosed is a check for the following amount: \$\sigma \frac{1}{2}\$125.00 \text{ Filing Fee} \square \square \frac{1}{2}\$130.00 \text{ Filing Fee & Certificate of Status} \square \frac{1}{2}\$155.00 \text{ Filing Fee & Certified Copy} \square \frac{1}{2}\$160.00 \text{ Filing Fee, Certificate of Status} \text{ Certified Copy}



CU Investment Solutions LLC Overland Park, KS 66210

5/1/2012

Ms. McCloud -

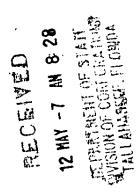
I am submitting additional information that was neglected from our original filing. Please see updated information for managers and a new certificate for your review.

If you have questions, please contact me at 913-912.5230.

Megan Adamson

Operations & Compliance

Administrator



COVER LETTER

TO:	Registration Section Division of Corporations
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For fur	ther information concerning this matter, please call:
	MAH JackSon at 13 912-5245 Name of Person Area Code & Daytime Telephone Number
	MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314 STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301
Enclos	seed is a check for the following amount: \$125.00 Filing Fee \$\infty\$\$ \$130.00 Filing Fee & \$155.00 Filing Fee & \$160.00 Filing Fee, Certificate Copy Certificate of Status & Certified Copy

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN
LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:
1. CU Investment Solution LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
(Same of Foreign 2 minor 2 months Company, must monage Eminior Elability Company, E.E.C., of EEC.)
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written
consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C," "LLC.")
Vancar 16.151 1661
2. Jurisdiction under the law of which foreign limited liability (FEI number, if applicable)
company is organized) A IDI 1701 5 PEX DETUGE
4. (Date of Organization) 5. (Duration: Year limited liability company will cease to
exist or "perpetual")
6. <u>existing corporation converted to LUC</u>
(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)
7
Over and Van VS U1210 (Street Address of Principal Office)
8. If limited liability company is a manager-managed company, check here
9. The name and usual business addresses of the managing members or managers are as follows:
Mike Doharty-8500 W 110th #1650 Overland Park, KS 66210
Matt Jackson-8500 W 110th #1650 Overland Park KS 66210
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the furisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a
ranslation of the certificate under oath of the translator must be submitted.)
11. Nature of business or purposes to be conducted or promoted in Florida: Wolfer dealer
21/11/2
Math
Signature of a member or an authorized representative of a member. (In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the
penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a
document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)
Typed or printed name of signee

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:
If unavailable, the alternate to be used in the state of Florida is:
2. The name and the Florida street address of the registered agent and office are:
Corporate Creations Network Inc.
(Name)
11380 Prosperity Farms Road #221E Florida Street Address (P.O. Box NOT ACCEPTABLE)
Palm Beach Gardens FL 33410 City/State/Zip

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, Florida Statutes.

Steven Buchta, Vice President

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

STATE OF KANSAS OFFICE OF SECRETARY OF STATE KRIS W. KOBACH

I, KRIS W. KOBACH, Secretary of State of the state of Kansas, do hereby certify, that according to the records of this office.

Business Entity ID Number: 1665306

Entity Name: CU INVESTMENT SOLUTIONS LLC

Entity Type: DOM: LTD LIABILITY COMPANY

State of Organization: KS

Resident Agent: MICHAEL DOHERTY

Registered Office: 8500 W. 110TH STREET SUITE 650, OVERLAND PARK, KS 66210

was filed in this office on December 21, 1988, and is in good standing, having fully complied with all requirements of this office.

No information is available from this office regarding the financial condition, business activity or practices of this entity.

TO THE STATE OF TH

In testimony whereof I execute this certificate and affix the seal of the Secretary of State of the state of Kansas on this day of May 01, 2012

KRIS W. KOBACH SECRETARY OF STATE

Certificate ID: 498408 - To verify the validity of this certificate please visit https://www.kansas.gov/bess/flow/validate and enter the certificate ID number.