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TEPARTHERT OF STAIL

SECRETARY OF STA

K.SALY EXAMINER APR - 9 2015 CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 120000000	ACCOUNT	INT NO.	:	1200000001	95
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REFERENCE : 578429

AUTHORIZATION :

COST LIMIT : (\$\frac{1}{2}\)5.00

ORDER DATE: April 6, 2015

ORDER TIME : 5:21 PM

ORDER NO. : 578429-010

CUSTOMER NO: 4188E

FOREIGN FILINGS

NAME: TMFS ADVISORS, LLC

XXXX QUALIFICATION (TYPE: <u>LL</u>)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Courtney Williams -- EXT# 62935

EXAMINER:

COVER LETTER

TO:	Registration Section Division of Corporations
	TMFS Advisors, LLC
SUBJE	CT:
	closed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of ce, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.
Please 1	return all correspondence concerning this matter to the following:
	Sarah Pfannenstiel
	Name of Person
	Bryan Cave LLP
	Firm/Company
	1200 Main Street, Suite 3800
	Address
	Kansas City, Missouri 64105
	City/State and Zip Code
	cbrandt@mutualfundstore.com
	E-mail address: (to be used for future annual report notification)
For furt	her information concerning this matter, please call:
	Sarah Pfannenstiel 374-3367
	Name of Contact Person Area Code Daytime Telephone Number
	MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314 Clifton Building Tallahassee, FL 32301
Enclos	ed is a check for the following amount: If \$125.00 Filing Fee

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

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A
FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. TMFS Advisors, LLC

(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC.")

Kansas (Jurisdiction under the law of which foreign limite company is organized)	d liability 3.	(FEI number, if applicable)	
upon qualification			
(Date first tran (See sections 605.	sacted business in Florida, if prior 0904 & 605.0905, F.S. to determ	to registration.) ine penalty liability)	
7301 College Boulevard	d, Suite 220		2015
Overland Park, Kansas	66210		2015 APR
	(Street Address of Principal O	ffice)	-
7301 College Boulevard	I, Suite 220	# # # # # # # # # # # # # # # # # # #	<u> </u>
Overland Park, Kansas	66210	7.	r Şi
	(Mailing Address)		11
7. The name, title or capacity and addr	ess of the person(s) who l	has/have authority to manage is/are:	
TMFS Holdings, LLC, Me	mber 7301 College Bo	ulevard, Suite 220, Overland Park, KS	6621
			

8. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

Crifford M. Brandt, Chief Compliance Officer

Signature of an authorized person

(in accordance with section 605.0203, 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.)

TMFS Holdings, LLC, Member; by: Clifford M. Brandt, Chief Compliance Officer

Typed or printed name of signee

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

If unavailal	ble, the alternate to b	be used in the	state of Florida	is:	
2. The nan	ne and the Florida st	rect address o	of the registered	agent and office are:	
	Corporation Se	vice Company	/	12 74 L. L. L	15 AP
			(Name)	702	8-3
	1201 Hays Stre	et			
	Florida Street Address (P.O. Box NOT ACCEPTABLE)		T ACCEPTABLE)	PA IO	
	Tallahassee		3230 FL	11	
			City/State/Zip		
liability con registered a statutes rela	npany at the place de agent and agree to ac ating to the proper a	esignated in th ct in this capa nd complete p	his certificate, I h city. I further ag erformance of m	of process for the above stated limite nereby accept the appointment as gree to comply with the provisions of by duties, and I am familiar with and covided for in Chapter 605, Florida Courtney Williams	all
	Ву:	(Signat	ture)	Asst. Vice Presider	nt
		\$ 100.00 \$ 25.00 \$ 30.00 \$ 5.00	Certified Copy	f Registered Agent	

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: 6085484

Entity Name: TMFS ADVISORS, LLC

Entity Type: KANSAS LTD LIABILITY COMPANY

State of Organization: KS

Resident Agent: BC AGENT SERVICES OF KANSAS, INC.

Registered Office: 130 N Cherry 3rd Floor, OLATHE, KS 66051

was filed in this office on February 13, 2006, 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.



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 April 06, 2015

Signature of Secretary of State

KRIS W. KOBACH SECRETARY OF STATE

Certificate ID: 652158 - To verify the validity of this certificate please visit https://www.kansas.gov/bess/flow/validate and enter the certificate ID number.