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TALLAHASSEE, FLORIDA

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COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Prime Capital Investment Advisors, 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:

Stephanie Rogers

Name of Person

Prime Capital Investment Advisors, LLC

Firm/Company

6201 College Blvd., Suite 700

Address

Overland Park, KS 66211

City/State and Zip Code

srogers@primecap-ia.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Stephanie Rogers

913

491-6226

at ()

Name of Contact 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

Enclosed is a check for the following amount:

☐ \$125.00 Filing Fee

☒ \$130.00 Filing Fee &
Certificate of Status

☐ \$155.00 Filing Fee &
Certified Copy

☐ \$160.00 Filing Fee, Certificate
of Status & Certified Copy

**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. Prime Capital Investment 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.")

2. Kansas

(Jurisdiction under the law of which foreign limited liability company is organized)

3. 82-1364595

(FEI number, if applicable)

4. _____

(Date first transacted business in Florida, if prior to registration)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 360 Central Avenue, Suite 880

(Street Address of Principal Office)

St. Petersburg, FL 33701

6. 6201 College Blvd., Suite 700

(Mailing Address)

Overland Park, KS 66211

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Tyler Olson

Office Address: 360 Central Avenue, Suite 800

St. Petersburg

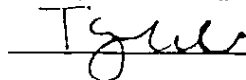
(City)

, Florida 33701

(Zip code)

Registered agent's acceptance:

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 application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.



(Registered agent's signature)

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

Title or Capacity:

Name and Address:

Title or Capacity:

Name and Address:

Chairman

Scott Colangelo

CEO

Glenn Spencer

5019 W. 147th Street

Leawood, KS 66224

5524 Golden Bear Dr.

Overland Park, KS 66223

President

Tim Hakes

Director of Finance

Stephanie Rogers

3904 Shawnee Mission Pkway

Fairway, KS 66205

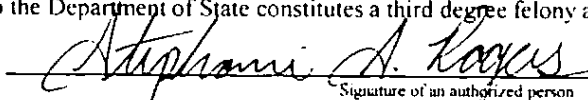
25467 W. 149th Place

Olathe, KS 66061

(Use attachments if necessary)

9. Attached is a 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. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

10. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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.



(Signature of an authorized person)

Stephanie S. Rogers

(Typed or printed name of signee)

**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: 8653800

Entity Name: PRIME CAPITAL INVESTMENT ADVISORS, LLC

Entity Type: DOM: LTD LIABILITY COMPANY

State of Organization: KS

Resident Agent: RAK SERVICES, INC.

Registered Office: 4200 Somerset Drive Suite 208, PRAIRIE VILLAGE, KS 66208

was filed in this office on May 01, 2017, 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 December 29, 2017

**KRIS W. KOBACH
SECRETARY OF STATE**

Certificate ID: 1012906 - To verify the validity of this certificate please visit <https://www.kansas.gov/bess/flow/validate> and enter the certificate ID number.

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