Filing Fee: \$150.00

ID Number: 24015



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State
Corporations Division
100 North Main Street
Providence, Rhode Island 02903-1335

LIMITED LIABILITY COMPANY

APPLICATION FOR REGISTRATION

(To Be Filed In Duplicate)

Pursuant to the provisions of Section 7-16-49 of the General Laws, 1956, as amended, the undersigned foreign limited liability company hereby applies for a Certificate of Registration to transact business in the state of Rhode Island, and for that purpose submits the following statement:

uia	t purpose submits the following statement.			
1.	The name of the limited liability company is: Janus Distributors LLC			
2.	The name, if different, under which it proposes to register and transact business in Rhode Island is:			
The limited liability company is organized under the laws of				
4.	The date of its organization is February 27, 2002			
5.	The period of duration of the limited liability company is (i	f perpetual, so state) Perp	petual	
6.	The address of the limited liability company's resident agent in Rhode Island is:			
	222 Jefferson Blvd., Suite 200	Warwick	, RI 02888	
	(Street Address, not P.O. Box)	(City/Town)	(Zip Code)	
	and the name of the resident agent at such address is National Registered Agents, Inc. (Name of Agent)			
7.	The secretary of state is appointed the agent of the foreign limited liability company for service of process if at any time there is no resident agent or if the resident agent cannot be found or served following the exercise of reasonable diligence.			
8.	The address of any office required to be maintained in the liability company is organized is:	e state or other jurisdiction u	under the laws of which the limited	
	None			
9.	The mailing address for the limited liability company is:			
	100 Fillmore Street, Denver, CO 80206			
	FILE	:D	70 10 72 01 1 1011	
	m No. 450 rised: 01/99 By	2002 3405	SECRETAL SERVICE STATE STATE	

To. The limited liability company is to be man	laged by.	
	(Check one box only)	
its members	or by one (1) or more managers	
. If the limited liability company has managers at the time of filing this application, please list the name and address o each manager:		
<u>Manager</u>	<u>Address</u>	
·		
	rtificate of good standing duly authenticated by the secretary of state or othe rwhich the foreign limited liability company was organized.	
	Under penalty of perjury, I declare and affirm that I have examined this Application for Registration, including any accompanying attachments, and that all statements contained herein are true and correct.	
Date: 4-30-02	Janus Distributors LLC	
	Print Exact Name of Limited Liability Company Making Application By	
	Signature of authorized person	
	Curt R. Fousi Asst. Secretary, for Janus Capital Management LLC,	
	Sole Member	