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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

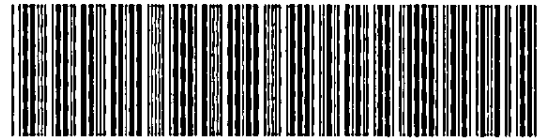
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October 12, 2021

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314-6327

RE: Proper Wealth, LLC (Doc. No. L20000102968)

Enclosed please find Articles of Amendment to Articles of Organization of Proper Wealth, LLC, and check number 2611 in the amount of \$25.00 in payment of the filing fee. Please use the above contact information for all correspondence and if further information is needed for this matter.

Please do not hesitate to call if you have any questions and thank you in advance for your attention to this matter.

Sincerely,

A handwritten signature in black ink, appearing to read 'Eric S. Haug', with a long, sweeping flourish extending to the right.

Eric S. Haug

Enclosures

T 850 583 1480
F 855 825 4449
<https://proper-law.com>

1701 Hermitage Blvd, Suite 104
Tallahassee, Florida 32308
eric@proper-law.com

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

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Proper Wealth, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on April 14, 2020 and assigned Florida document number L20000102968.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

_____, **Florida** _____
City *Zip Code*

New Registered Agent's Signature, if changing Registered Agent:

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 as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	Vernon, Robin K	1701 Hermitage Blvd., Suite 104	<input type="checkbox"/> Add
		Tallahassee, FL 32308	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
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