## 660000262202

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R. HUNT 02/28/23

## **COVER LETTER**

TO: Registration : Division of C				
WRIGHT	GLOBAL CONSULTANTS L	LC		
SUBJECT:	Name of Lin	nited Liability Company		
The enclosed Articles of	of Amendment and fee(s) are sub	omitted for filing.		
Please return all corres	pondence concerning this matter	to the following:		
	JULES WRIGHT		🕶	
		Name of Person	- 10 - 10 - 10	
	WRIGHT GLOBAL CON	SULTANTS LLC	7. FEB 2	47 q
Firm/Company				i r•=
	1903 WILLESDON DR V	V	PH 2	
		Address	五型 二	
	JACKSONVILLE, FL 32	246	, <u>H</u> 21	
		City/State and Zip Code	•••	
	SILVERMONEYMAVEN	@GMAIL.COM to be used for future annual report noti	fination)	
For further information	concerning this matter, please of	•	ncation)	
JULES WRIGHT	.,	904 412-3727		
Name of Person		at () Area Code Daytim	e Telephone Number	
Enclosed is a check for	the following amount:			
■ \$25.00 Filing Fee		☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
Mailing Addr Registration Division of P.O. Box 63 Tallahassee	Section Corporations 27	Street Address: Registration Second Division of Core The Centre of Tallahassee, FL	porations allahassee e Street, Suite 810	

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

WRIGHT GLOBAL CONSULTANTS					_
(Name of the Limited I (A)	iability Company as it no lorida Limited Liability Co	w appears on our rec mpany)	oras.)		
The Articles of Organization for this Limited Liabi	lity Company were file	d on <u>08/24/2020</u>		and	assigned
Florida document number L20000262202	·				
This amendment is submitted to amend the following	ng:				
A. If amending name, enter the new name of the	e limited liability com	pany here:			
SILVER MONEY MAVEN LLC					
he new name must be distinguishable and contain the words	"Limited Liability Compar	ny," the designation "L	LC" or the abb	revistion	"L.L.C."
Enter new principal offices address, if applicable	e: N/A			- <del> </del>	- · · · · · · · · · · · · · · · · · · ·
Principal office address MUST BE A STREET A	DDRESS)			N	4
			<u> </u>		177
	N/A		)F ST 1835	.; ₹	
Enter new mailing address, if applicable:	- N/A			<u> </u>	
<u>Mailing address MAY BE A POST OFFICE BO</u>	<u>~</u>				
				-	
3. If amending the registered agent and/or regisgent and/or the new registered office address h		n our records, <u>ent</u>	ter the name	of the	new regi
Name of New Registered Agent:	i/A				
New Registered Office Address:	N/A				
	- I	Enter Florida street add	iress		
			Florida		
=	City	<del>7</del>		Zip Co	xde

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 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>	Name	<u>Address</u>	Type of Action
N/A	N/A	N/A	
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LOGISTICS, NOTARY, FINA	NCIAL PLANNING, ACADEMICS	S, E-COMMERCE, MOBII	LE SERVIC	EES
AND ALL OTHER LEGAL A	CTS PERMITTED BY LIMITED L	IABILITY COMPANIES I	N THE STA	TE
OF FLORIDA.			·	
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ctive date, if other than the d	ate of filing:	(opti	onal)	
: If the date inserted in this bloc	e specific and cannot be prior to date of the does not meet the applicable statut	iling or more than 90 days after ory filing requirements, thi	filing.) Pursu s date will n	ant to 605. of be liste
ment's effective date on the Dep	artment of State's records.			
ord specifies a delayed effective of filed.	late, but not an effective time, at 12:	01 a.m. on the earlier of: (t	) The 90th	day after
d Ebruary 21	. 2023			
	gnature of a member or authorized repre			

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