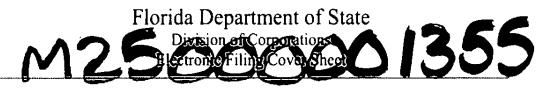
Division of Corporations



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H25000103006 3)))



H250001030063ABCR

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENT SOLUTIONS INC

Account Number : I20100000062 Phone : (888)705-7274 Fax Number : (888)706-7274

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:__

1925 HFR

LLC REGISTERED AGENT CHANGE PRIVATE WEALTH ADVISERS FL LLC

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MAR 2 0 2025

K. Brumbley

COVER LETTER

	istration Section ision of Corporations		
SUBJECT:	PRIVATE WEALTH ADVISE	RS FL LLC	
502001.		Name of Limited 1	Liability Company
Dear Sir or I	Madam:		
The enclosed	d Registered Agent/Registered	Office Change and	d fee(s) are submitted for filing.
Please return	n all correspondence concernin	g this matter to the	e following:
Mary Castill	0		
	Name of Person		
Registered A	gent Solutions, Inc.		
	Firm/Company		
Corporate Ce	enter One, 5301 Southwest Pkwy,	Ste 400	
	Address		
Austin, TX 7	8735		
	City/State and Zip Co	de	
E-mail	address: (to be used for future	annual report noti	fication)
For further i	nformation concerning this ma	tter, please call:	
Mary Castill	o	888 at (705-7274
	Name of Person		Area Code & Daytime Telephone Number
Reg Div P.O	iling Address: pistration Section ision of Corporations Box 6327 ahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
Enc	losed is a check for the follow	ving amount:	
□ \$	25 Filing Fee	a 9	\$55 Filing Fee & Certified Copy
INHS18 (2/14	4)		

15129570210

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116. Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

2. (a)	28566 ARLOW CT. #803	(1	28566 ARLO	OW CT. #8	303	
, -,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)			
	BONITA SPRINGS, FL 34135		BONITA SP			
	1/14/2025		M250000013	55		
3.	Date of filing/registration in Florida	4.	D	ocument r	ıumber	
5. (a)	MATHERS, ROBERT					
. (-)	Registered Agent and Registered Office shown on the records 1395 PANTHER LANE, SUITE 300	of the Florid	Dept. of State:			
	Registered Office Address (MUST BE FLORIDA STREE	ET ADDRES.	<u> </u>			
	NAPLES	FL_34109				
(b)	Registered Agent Solutions, Inc.				2025 HAK 1 Y	
	Enter name of NEW Registered Agent and/or NEW Registe	red Office ad	dress:		A.	
	2894 Remington Green Ln.					P LED
	NEW Registered Office Address:				21.5	ي بب
	Ste. A	 -				 199
	Tallahassee	FL_32308			-	
hange igent w vas/we	mited liability company is not organized under the or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited re authorized by an affirmative vote of the member	laws of the the registere liability co	ed office and to impany, it is ho iited liability o	he busines ereby cont company o	ss office of the re firmed that the cl	gistered nange(s)
ie arti	cles of organization or the operating agreement of t Rosie K. Mathers		iability compa sie K. Mathers	•	Manager	

Signature of a member or authorized representative of a member

Printed or typed name of signee

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.

Mackenzie Hibler, Asst. Secretary
Signature of Registered Agent