2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P2000000841

Entity Name: HELM WEALTH MANAGEMENT INC.

Current Principal Place of Business:

999 BRICKELL AVE., STE. 300 MIAMI, FL 33131

Current Mailing Address:

999 BRICKELL AVE., STE. 300 MIAMI, FL 33131

FEI Number: 84-4096583

Name and Address of Current Registered Agent:

AFC CORPORATE SERVICES, LLC 999 BRICKELL AVE., STE. 300 MIAMI, FL 33131 US

Certificate of Status Desired: Yes

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

| SIGNATURE | : MARK J. SCHEER, ESQ. | | | 01/18/2024 |
|---------------------------|--|-----------------|-----------------------------|------------|
| | Electronic Signature of Registered Agent | | | Date |
| Officer/Director Detail : | | | | |
| Title | D, VP | Title | D, VP | |
| Name | FENTON, JAMES P. | Name | PARDO, RAFAEL | |
| Address | 999 BRICKELL AVE., STE. 300 | Address | 999 BRICKELL AVE., STE. 300 | |
| City-State-Zip: | MIAMI FL 33131 | City-State-Zip: | MIAMI FL 33131 | |
| Title | D, VP | Title | D, PRESIDENT | |
| Name | POWELL, JEFFERSON N. JR. | Name | SCHEER, MARK J. | |
| Address | 999 BRICKELL AVE., STE. 300 | Address | 999 BRICKELL AVE., STE. 300 | |
| City-State-Zip: | MIAMI FL 33131 | City-State-Zip: | MIAMI FL 33131 | |
| Title | SECRETARY | Title | ASSISTANT VICE PRESIDENT | |
| Name | BERLANT, JOEL M. | Name | BRAVO, CARLOS E | |
| Address | 999 BRICKELL AVE., STE. 300 | Address | 999 BRICKELL AVE., STE. 300 | |
| City-State-Zip: | MIAMI FL 33131 | City-State-Zip: | MIAMI FL 33131 | |
| Title | ASSISTANT VICE PRESIDENT | | | |
| Name | STANCIOFF, LISSETTE S | | | |
| Address | 999 BRICKELL AVE., STE. 300 | | | |
| City-State-Zip: | MIAMI FL 33131 | | | |

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JOEL M. BERLANT

SECRETARY

01/18/2024

Electronic Signature of Signing Officer/Director Detail

Date

FILED Jan 18, 2024 Secretary of State 9115406882CC