

**2019 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L17000249733

**FILED**  
**Apr 11, 2019**  
**Secretary of State**  
**8641206002CR**

**Entity Name:** AMATO WEALTH MANAGEMENT, LLC

**Current Principal Place of Business:**

C/O ROSE MARIE AMATO  
2003 NORTH OCEAN BLVD., APT.504  
BOCA RATON, FL 33431

**Current Mailing Address:**

C/O ROSE MARIE AMATO  
2003 NORTH OCEAN BLVD., APT.504  
BOCA RATON, FL 33431 US

**FEI Number:** 82-3639307

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

AMATO, ROSE MARIE  
2003 NORTH OCEAN BLVD.  
APT. 504  
BOCA RATON, FL 33431 US

*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:** ROSE MARIE AMATO

04/11/2019

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name AMATO, ROSE MARIE  
Address 2003 NORTH OCEAN BLVD., APT. 504  
City-State-Zip: BOCA RATON FL 33431

Title MGR  
Name AMATO, CAROL  
Address A-1 GOLF AVENUE  
City-State-Zip: MAYWOOD NJ 07607

Title MGR  
Name PEYKO, PATRICIA AMATO  
Address 55 HOLLYBROOK ROAD  
City-State-Zip: PARAMUS NJ 07652

Title MGR  
Name AMATO, DIANE  
Address A-1 GOLF AVENUE  
City-State-Zip: MAYWOOD NJ 07607

*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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** ROSE MARIE AMATO

**MANAGER**

04/11/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date