

LO2000009196

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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(Business Entity Name)

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FILED
2017 JUL -7 AM 10:27
FALLS CHURCH, VA
FALLS CHURCH, VA

JUL 12 2017
J. HARRIS

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Wealth Management Associates, LLC
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Richard A. Perea

Name of Person

Wealth Management Associates, LLC

Firm/Company

700 Beach Dr. NE #503

Address

St. Petersburg, FL 33701

City/State and Zip Code

rperea@wealthma.net

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Richard A. Perea at (727) 954-5138

Name of Person

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

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

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 22, 2017

RICHARD A PEREA
700 BEACH DR NE #503
ST PETERSBURG, FL 33701

SUBJECT: WEALTH MANAGEMENT ASSOCIATES, LLC
Ref. Number: L02000009196

FILED
2017 JUL -7 AM 10:27
TALLAHASSEE, FLORIDA

We have received your document for WEALTH MANAGEMENT ASSOCIATES, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Jenna D Harris
Regulatory Specialist II

Letter Number: 817A00012713

RECEIVED
JUL -7 PM 12:15
CLERK OF STATE
TALLAHASSEE, FLORIDA

*Jenna,
Please see
attached signature.
Thank you!
Rae*

**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.

1. Name of the limited liability company: Wealth Management Associates, LLC

2. (a) 700 Beach Drive NE, #503 (b) 700 Beach Drive NE, #503
Principal office address of limited liability company: Mailing address of limited liability company:
(Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE BOX)
St. Petersburg, St. Petersburg
FL 33701 FL 33701

3. April 15, 2002 4. L02000009196
Date of filing/registration in Florida Document number

5. (a) Richard A. Perea
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
3914 Turkey Oak Dr (recently changed)
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
Valrico, FL 33596

(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:
NEW Registered Office Address:
700 Beach Drive NE, #503
St. Petersburg, FL 33701

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2017 JUL -7 AM 10:27
TALLAHASSEE FL 32314

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

[Signature]
Signature of a member or authorized representative of a member

Richard A. Perea
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.

Signature of Registered Agent