LIMITED LIABILITY COMPANY

Mar 31, 2003 8:00 am UNIFORM BUSINESS REPORTA(UBR) **Secretary of State DOCUMENT # L02000031811** 03-17-2003 90592 028 ****50.00 1. Entity Name RCH WEALTH MANAGEMENT, LLC DO NOT WRITE IN THIS SPACE 2. Principal Place of Business 3. Mailing Address ONE S.E. 3RD AVE SAME Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 10TH FLOOR City & State City & State 4. FEI Number Applied For MIAMI, FL 33131 56-2308073 Not Applicable Country Zip Country \$5.00 Additional 5. Certificate of Status Desired 33131 MIAMI-DADE Fee Required 7. Name and Address of Current Registered Agent MARC_K._POWERS,_CPA_ DO NOT WRITE Street Address (P.O. Box Number is Not Acceptable) INTHIS SPACE ONE S.E. 3RD AVENUE, 10TH FLOOR MIAMI liging its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered FEE 18 \$50:00 ke Check Payable to Florida Department of State DUE BY MAY 1 MANAGING MEMBERS/MANAGERS 9. TITLE MGRM NAME RACHLIN COHEN & HOLTZ LLP NAME STREET ADORESS STREET ADDRESS ONE S.E. 3RD AVENUE, 10TH FLOOR CITY ST. ZIP. CITY-ST-ZIP MIAMI, FL 33131 TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY ST ZIP mu de TITLE NAME NAME STREET ACORESS STREET ACCRESS DO NOTWRITE CITY-ST-7IP CIY ST ZIP ·mc · INTHIS SPACE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP TITLE STORY TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE inter and NAME NAME

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes, I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the timited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

STREET ADDRESS CITY-ST-ZIP