L05000093404

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B. BOSTICK
DEC 1 9 2012

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

WILLIES TO Progress Wealth Management, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Veronica Granata

Name of Person

Bulltick Financial Services, LLC

Firm/Company

701 Brickell Avenue, Suite 2550

Address

Miami, FL 33131

City/State and Zip Code

vgranata@bulltick.com

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

For further information concerning this matter, please call:

Veronica Granata

{.,/}305.722.5018

Name of Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

■ \$25.00 Filing Fee

□\$30.00 Filing Fee & Certificate of Status

□\$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

□\$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

MAILING ADDRESS:

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

STREET/COURIER ADDRESS:

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Progress Wealth Management, LLC	
(Name of the Limited Liability Company as it now a (A Florida Limited Liability Compa	ppears on our records.) any)
The Articles of Organization for this Limited Liability Company were filed on Florida document number <u>L05000093404</u> .	09/22/2005 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability compan	<u>v here</u> :
Bulltick Wealth Management Holdings, LLC	
The new name must be distinguishable and end with the words "Limited Liability C "L.L.C."	ompany," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	. 04
(Principal office address MUST BE A STREET ADDRESS)	A 2
	A R T
Enter new mailing address, if applicable:	ASSET IN
(Mailing address MAY BE A POST OFFICE BOX)	2 2 0
	7
B. If amending the registered agent and/or registered office address registered agent and/or the new registered office address here:	on our records, enter the name of the nev
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	, Florida
City	Zip Code

New Registered Agent's Signature, if changing Registered Agent:

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 608, 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.

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member **Type of Action Title** <u>Name</u> <u>Address</u> Remove Remove Remove Remove Remove Remove

. If amend	ing any other information, enter change(s) here: (Attach additional sheets, if necessary.)
,	•
_{oated} Dec	cember 14 /2012
	Signature of a member of authorized representative of a member
	Humberto Bañuelos
	Typed or printed name of signee
	Page 3 of 3

Filing Fee: \$25.00

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