

LOS 000109837

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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FILED  
19 FEB 27 PM 3:19  
S. YOUNG  
TALLAHASSEE, FLORIDA

FEB 27 2019  
S. YOUNG



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

February 19, 2019

AMAURY CIFUENTES  
BLUEKEY PERSONAL WEALTH PLANNING  
3878 SHERIDAN STREET  
HOLYWOOD, FL 33021

SUBJECT: BLUEKEY PERSONAL WEALTH PLANNING, A LIMITED LIABILITY  
COMPANY  
Ref. Number: L05000109837

We have received your document for BLUEKEY PERSONAL WEALTH PLANNING, A LIMITED LIABILITY COMPANY and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

The name designated in your document is unavailable because it is the same as or not distinguishable from an existing entity. If the principals are the same in both entities, please send a letter or affidavit advising us of this association, along with your articles so that we may complete the filing process.

BLUEKEY WEALTH ADVISORS, LLC - L18000163680

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) 245-6050.

Shelia H Young  
Regulatory Specialist II

Letter Number: 619A00003499

**Young, Sheila H.**

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**From:** Amaury Cifuentes <amaury@bluekeyadvisors.com>  
**Sent:** Wednesday, February 27, 2019 2:46 PM  
**To:** Young, Sheila H.  
**Subject:** REF L0500109837

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**EMAIL RECEIVED FROM EXTERNAL SOURCE**

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Mrs Young,

As per our conversation, I release the name of BlueKey Wealth Advisors to BlueKey Personal Wealth Planni  
LLC

Thank you for your assistance.

Amaury S-Cifuentes, CFP® CMP®  
CERTIFIED FINANCIAL PLANNER™  
CERTIFIED MEDICAL PLANNER™



3878 Sheridan Street  
Hollywood, FL 33021  
Direct 754-260-1515 | Cell 954-448-2804  
[www.bluekeyadvisors.com](http://www.bluekeyadvisors.com)

(Email typed and sent via Smartphone. Please excuse typos or Smartphone word replacements)

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## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: BLUEKEY PERSONAL WEALTH PLANNING LLCV  
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:

AMAURY CIFUENTES

Name of Person

BLUEKEY PERSONAL WEALTH PLANNING LLC

Firm/Company

3878 SHERIDAN STREET

Address

HOLLYWOOD FL 33021

City/State and Zip Code

AMAURY@BLUEKEYADVISORS.COM

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

For further information concerning this matter, please call:

AMAURY CIFUENTES

754

260-1515

at ( )

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



If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager  
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
M	MANNY FADRAGA	3878 SHERIDAN STREET HOLLYWOOD FL 33021	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
M	AMAURY CIFUENTES	3878 SHERIDAN STREET HOLLYWOOD FL 33021	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Change

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Signature of a member or authorized representative of a member

Typed or printed name of signee