

# **2011 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L08000059755

**FILED**  
**Apr 08, 2011**  
**Secretary of State**

**Entity Name:** FINANCIAL WEALTH ASSOCIATES, L.L.C.

**Current Principal Place of Business:**

13302 ST TROPEZ CR  
PALM BEACH GARDENS, FL 334101483

**New Principal Place of Business:**

**Current Mailing Address:**

13302 ST TROPEZ CR  
PALM BEACH GARDENS, FL 334101483

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired (X)**

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

SECONTINE, PATRICIA R  
13302 ST TROPEZ CR  
PALM BEACH GARDENS, FL 334101483 US

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

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: PATRICIA R SECONTINE

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: SECONTINE, PATRICIA R  
Address: 13302 ST TROPEZ CR  
City-St-Zip: PALM BEACH GARDENS, FL 334101483

Title: MGR  
Name: SANTIAGO, ANNETTE  
Address: 5121 THYME  
City-St-Zip: PALM BEACH GARDENS, FL 334101483

I hereby certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: PATRICIA R SECONTINE

MGRM

04/08/2011

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date