# L09000067186

(Re	questor's Name)	-
	dress)	
(Ad	ldress)	<del></del>
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



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FILED

MESER 25 PM 2: 38

J. BRYAN

SEP. 26 2012

**EXAMINER** 



## FLORIDA DEPARTMENT OF STATE Division of Corporations

August 7, 2012

DANIEL RICHMOND RICHMOND SCOTT LLC 848 BRICKELL AVE, SUITE 900 MIAMI, FL 33131

SUBJECT: RICHMOND SCOTT WEALTH MANAGEMENT LLC

Ref. Number: L09000067186



We have received your document for RICHMOND SCOTT WEALTH MANAGEMENT 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):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with an affidavit or letter stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

### Adding "of Florida" or "Florida" to the end of a name is not acceptable.

The document number of the name conflict is #:L07000031579, RICHMOND AND SCOTT LIMITED COMPANY.

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.

Joey Bryan Regulatory Specialist II

Letter Number: 212A00020436

# **COVER LETTER**

TO:	Registration Sect Division of Corpo	ion orations		
SUBJI	г <b>ст.</b>	Richme	ond Scott LLC	
SOLUT	Le1		ited Liability Company	
				·
The en	aclosed Articles of A	mendment and fee(s) are sul	bmitted for filing.	
Please	return all correspond	dence concerning this matter	r to the following:	FILED PH 2: 38
			Daniel Richmond	25
			Name of Person	1000 星 日
			Richmond Scott LLC	
			Firm/Company	80
		848	Brickell Ave, Suite 900	
			Address	
			Miami, FL 33131	·
			City/State and Zip Code	
		E-mail address: (	nond@richmondscott.com to be used for future annual report notificat	tion)
For fu		ncerning this matter, please	call:	•
	Danie	el Richmond	at (	10-8833
	Name of I	Person	Area Code & Daytime T	elephone Number
Enclos	sed is a check for the	following amount:		
<b>\$2</b> :	5.00 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
	SEE	CREPIT ATTA	C 4 E C	(additional copy is enclosed)
		NG ADDRESS: tion Section	STREET/COURIER Registration Section	R ADDRESS:

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

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

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ealth Managem	ent LLC	
npany as it now appea ed Liability Company)	rs on our records.)	
any were filed on	07/13/2009	and assigned
liability company her	<u>re</u> :	
d Scott LLC		
Limited Liability Compa	any," the designation "	LLC" or the abbreviation
848 Brickell	Ave	
Suite 900	<u> </u>	4 5
Miami, FL 33	3131	
		P 25
848 Brickell A	Ave 📆	
Suite 900		
Miami, FL 33	3131	 ω Θ
l office address on here:	our records, <u>enter</u>	the name of the new
ichmond		
kell Ave, Suite 900	)	
Er	nter Florida street add	dress
Miami	, Florida	33131
City		Zip Code
	liability company here d Scott LLC Limited Liability Company  848 Brickell A Suite 900 Miami, FL 33  848 Brickell A Suite 900 Miami, FL 33  I office address on here: ichmond  kell Ave, Suite 900  En Miami	iability company here:  d Scott LLC  imited Liability Company," the designation "  848 Brickell Ave  Suite 900  Miami, FL 33131  848 Brickell Ave  Suite 900  Miami, FL 33131  I office address on our records, enterhere: ichmond  kell Ave, Suite 900  Enter Florida street add  Miami , Florida

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

	<u>Name</u>	<u>Address</u>	Type of Actio
			Add Remove
			Add Remove
	<del></del>		D D om ove
			Add Remove
<del></del>			AddRemove
If amen	ding any other information,	enter change(s) here: (Attach additional sh	
If amen	ding any other information,		eets, if necessary.)
		enter change(s) here: (Attach additional sh	eets, if necessary.)
If amend	ding any other information,	enter change(s) here: (Attach additional sh	eets, if necessary.)

Page 2 of 2

Filing Fee: \$25.00