

410000015798

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

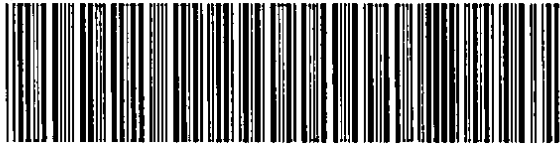
Special Instructions to Filing Officer:

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TALLAHASSEE, FLORIDA

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2017 JUL 31 PM 2:51

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

J. HARRIS

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Wisdom Concierge 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:

Andrew Patterson  
Name of Person  
Wisdom Concierge LLC  
Firm/Company  
1 E Broward Boulevard Suite 700  
Address  
Fort Lauderdale Florida 33301  
City/State and Zip Code  
info@wisdomconcierge.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Andrew Patterson at ( 443 ) 558-6253  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- |                                                        |                                                                        |                                                                                                  |                                                                                                                            |
|--------------------------------------------------------|------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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

Wisdom Concierge LLC

2017 JUN 31 PM 2:51  
REGISTERED AGENT  
STATE OF TEXAS  
TALLAHASSEE FL 32304

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>
Treasurer	Shaniqueta Patterson	1 E Broward Boulevard Suite 700 Ft. Lauderdale, Florida 33321	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Remove
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ALLAHBACH COUNTY  
CLERK OF COURT

[illegible]

(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) **Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated \_\_\_\_\_

Signature of a member or authorized representative of a member

Andrew Patterson

Typed or printed name of signee

**FILED**

2017 JUL 31 PM 2:51

CLERK OF DISTRICT COURT  
JAILHOUSE  
TALLAHASSEE FLORIDA