L10000079584

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COVER LETTER

	stration Sect ion of Corpo			
** *** *** *****		-		
SUBJECT: _		Name of Limi	ited Liability Company	
The enclosed a	Articles of A	mendment and fee(s) are sub-	mitted for filing.	
Please return a	all correspond	dence concerning this matter	to the following:	
		Eric Haave		
			Name of Person	
		Verus Wealth Management	t, LLC	
		Name of Person Verus Wealth Management, LLC Firm/Company 6412 55th Square Address Vero Beach, FL 32967 City/State and Zip Code haave71@aol.com E-mail address: (to be used for future annual report notification) tion concerning this matter, please call: at (202) 557-0710 Area Code Daytime Telephone Number for the following amount: ee \$30.00 Filing Fee & S55.00 Filing Fee & Certificate of Status & Certificate Opy Certificate of Status &		
		6412 55th Square		
			Address	· ·
		Vero Beach, FL 32967		
		-	City/State and Zip Code	
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For further inf	ormation cor			Cathori
Eric Haave			202 557-0710	
	Name of I	Person		Telephone Number
Enclosed is a c	check for the	following amount:		
□ \$25.00 Fit	ing Fee			

MAILING ADDRESS:

TO:

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**

2017AUS FILED
' MUR 11
TALLAHASSEE, FLORING.
TOSEL FLORID

Verus Wealth Management, LLC

(Name of the Limited Liability Company as it now appears on our records.)

	•	шарину Сотрану)	SEL FLORING		
The Articles of Organization for this Limited		were filed on 7/29/2010	and assigned		
Horida document number L10000079584	·				
This amendment is submitted to amend the fo	llowing:				
A. If amending name, enter the new name	of the limited liab	ility company here:			
Broadpoint Financial, LLC					
The new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the designation "	LLC" or the abbreviation "L.L.C."		
Enter new principal offices address, if applicable:		6412 55th Square			
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		Vero Beach, FL			
		32967			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BON)		6412 55th Square			
		Vero Beach, FL			
		32967			
3. If amending the registered agent and registered agent and/or the new registered of			ords, <u>enter the name of the new</u>		
Name of New Registered Agent: Eric Haave					
New Registered Office Address:	6412 55th Squa				
	Enter Florida street address				
	Vero Beach	·	Florida <u>32967</u>		
		City	Zip Code		

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 605, 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 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>	Address	Type of Action
MGRM	David A. Brooks	3199 Suntree BLVD, unit 2	
		Viera FL 32940	■ Remove
			Change
MGRM	Eric Haave 6412 55th Squar	6412 55th Square	≅ Add
		Vero Beach, FL 32967	☐ Remove
			□ Change
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			8/14/2007				
ective date	, if other than t e is listed, the date	he date of filir	1g:	en des cétions	(optional)	
<u>te:</u> If the da	te inserted in this ective date on the	s block does not	meet the applic	able statutory fil	ing requirements	this date will	not be listed:
record sp he 90th c	ecifies a delay lay after the r	ed effective ecord is filed	date, but no	ot an effective	e time, at 12:	01 a.m. on	the earlier
ed			·	·			
				-			

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00