L110000029166

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EXAMINER

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COVER LETTER

TO:

Registration Section

Division of Corporations			
SUBJECT:	GENERATIONS V	VEALTH ADVISORS, LLC	
		ited Liability Company	
The enclosed Articles	of Amendment and fee(s) are sul	bmitted for filing.	
Please return all corres	pondence concerning this matter	r to the following:	
	F	FREDERICK E. TREFF	
		Name of Person	
•	GENERATION	ONS WEALTH ADVISORS, LLC	;
		Firm/Company	
	301 YA	MATO ROAD SUITE 2150	
		Address	
	ROCA	RATON, FLORIDA 33431	2011 HAR 30 PM I2: 33
		City/State and Zip Code	- PI 12
	f.tref	f@valumaxfinancial.com	S S
	E-mail address: (to be used for future annual report notification)	<u> </u>
For further information	concerning this matter, please c	call:	
FRE	DERICK TREFF	at (561) 767-	6133
Name	of Person	Area Code & Daytime Telep	hone Number
	the following amount:		
\$25.00 Filing Fee	S30.00 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)
Regis Divis P.O.	LING ADDRESS: stration Section sion of Corporations Box 6327 hassee, FL 32314	STREET/COURIER AI Registration Section Division of Corporations Clifton Building 2661 Executive Center Ci Tallahassee, FL 32301	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

GENERATIONS WEALTH MANAGEMENT, LLC

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

MARCH 09, 2011 and assigned The Articles of Organization for this Limited Liability Company were filed on ____ L11000029166 Florida document number This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address Zip Code City

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 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

MGRM = Managing Member **Title** <u>Name</u> **Address** Type of Action **MGRM TODD DORSCHEL** 301 YAMATO ROAD SUITE 2150 ✓ Add Remove **BOCA RATON, FLORIDA, 33431** ☐ Add Remove ≻ ∐ Ad∉ Remove Add Remove دين وين \square Add □ Remove \prod Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) MARCH 27 2011 Dated_ Signature of a member or authorized representative of a member FREDERICK E. TREFF Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00