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(Requestor's Name)	-
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## **COVER LETTER**

Divi	ision of Corp	oorations				
SUBJECT:	R S WEALT	TH MANAGEMENT, LLC				
SOBJECT.		Name of Lim	ited Liability Company			
The enclosed	Articles of A	Amendment and fee(s) are sub	mitted for filing.			
Please return	all correspon	dence concerning this matter	to the following:			
		Marc Reisman				
			Name of Person		16,	FALL
		·	Firm/Company		- 110	AHA
	12444 Brantley Commons Court			16 JUN -7 AM	MALLAHASSEE	
			Address		i: 12:	
		Fort Myers, FL 33907			: 30	:
		mara raisman@lal.com	City/State and Zip Code			*1
		marc.reisman@lpl.com  E-mail address: (	to be used for future annual report notific	cation)		
For further in	formation co	ncerning this matter, please ca	all:			
Marc Reisma	ın		239 433-1223 at ( )			
	Name of	Person		Telephone Number		
Enclosed is a	check for the	following amount:				
<b>£</b> \$25.00 Fi	ling Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Fiting Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
	MAILI	NG ADDRESS:	STREET/COURIE	R ADDRESS:		

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

TO:

Registration Section

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

R S WEALTH MANAGEMENT, LLC		
( <u>Name of the Limited Liability</u> (A Florida l	/ Company as it now appears on our records Limited Liability Company)	<u>s.</u> )
The Articles of Organization for this Limited Liability Co	ompany were filed on 04/19/2011	and assigned
Florida document number L11000046404	<u>.</u>	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ed liability company here:	
The Wealth Planning Group, LLC		
The new name must be distinguishable and contain the words "Limite	ed Liability Company," the designation "LLC"	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		_ \$\
•	EGG	<u>8</u>
Principal office address MUST BE A STREET ADDRI	<u> </u>	
		1 11
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		?
Manual Manual Manual Manual Control Born		3 - A
B. If amending the registered agent and/or registered agent and/or the new registered office addre		enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	· · · · · · · · · · · · · · · · ·
	, Flor	
	City	Zip Code

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 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 = M $AMBR = A$	anager uthorized Member		
<u>Title</u>	Name	Address	Type of Action
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n effect <u>ste:</u> If	e date, if other than the date of filing: (optional) ive 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 the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be t's effective date on the Department of State's records.	605.0207 listed as	7 (3) 6 the
recor he 9	rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the ea Oth day after the record is filed.	ırlier ot	f:
ted	15.24-16.		
	Signature of a member or authorized representative of a member	•	

Page 3 of 3

Filing Fee: \$25.00