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(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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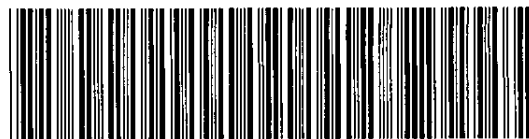
(Business Entity Name)

(Document Number)

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17 MAY 25 AM 11:37

MAY 26 2017
S. YOUNG

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT:

Global Wealth Management Advisory, 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:

Grant Connors

Name of Person

Firm/Company

2810 E Oakland Park Blvd suite 101

Address

Fort Lauderdale FL 33306

City/State and Zip Code

Grant@askglobalwealth.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jennifer Allard

Name of Person

at (954)

Area Code

533-7144

Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 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
(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

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17 MAY 25 AM 11:37

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Global Wealth Management Advisory, LLC

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

The Articles of Organization for this Limited Liability Company were filed on 4/18/11 and assigned
Florida document number 1110000050436

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Global Wealth Retirement Planning, LLC

The new name must be distinguishable and contain 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)

2810 E. Oakland Park Blvd., Suite 101
Fort Lauderdale FL 33306

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

2810 E Oakland Park Blvd, Suite 101
Fort Lauderdale FL 33306

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:

C. Grant Conness

New Registered Office Address:

2810 E Oakland Park Blvd., Suite 101

Enter Florida street address

Fort Lauderdale, Florida 33306

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 = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
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		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change

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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

CLERK OF DISTRICT COURT
SECRETARY OF FLORIDA
TALLAHASSEE, FLORIDA
MAY 25 AM 11:37

E. Effective date, if other than the date of filing: _____ (optional)


(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.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated MAY 23, 2017



Signature of a member or authorized representative of a member

C. Grant Connors

Typed or printed name of signee