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TALLAHASSEE, FLORIDA

N. Guttigen FEB 2 5 2014

COVER LETTER

TO: Registration Sec Division of Corp			
	ancial Management, Ll	LC	
SUBJECT:	Name of Limi	ited Liability Company	
	•		
The enclosed Articles of A	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspon	idence concerning this matter	to the following:	
	Jennifer Rebecca Fa	ailla	
		Name of Person	
	Strada Wealth Mana	agement, LLC	
		Firm/Company	
	44 West Flagler Stre	eet, Suite 2250	
		Address	·····
	Miami, Florida 33130	0	
	jennifer@faillafinanci	City/State and Zip Code al.com	
	E-mail address: (t	to be used for future annual report notifica	ation)
For further information co	ncerning this matter, please ca	ali:	
Jennifer Rebecca F	ailla	866 526-7098	
Name of	Person	at () Area Code Daytime T	elephone Number
Enclosed is a check for the	e following amount:		
□ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status		□ \$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

TO ARTICLES OF ORGANIZATION **OF**

FILED 2014 FEB 24 AM 11: 43

SECRETARY OF STATE TALLAHASSEE, FLORIDA

Failla Financial Management, LLC

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

Florida document number	1000/18565		
This amendment is submitted to amend the fo	llowing:		
A. If amending name, enter the new name Strada Wealth Management, LLC	of the limited liab	ility company here	;
The new name must be distinguishable and end with th	e words "Limited Liab	oility Company," the des	signation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if appli	icable:	44 West Flagi	er Street, Suite 2250
(Principal office address MUST BE A STRE		Miami, Florida	33130
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	E <u>BOX)</u>		
	office address her	<u>e</u> :	
	office address her		
	n/a - Still Je	<u>e</u> :	Failla
registered agent and/or the new registered (n/a - Still Je	e: ennifer Rebecca agler Street, Suit	Failla
registered agent and/or the new registered of New Registered Agent:	n/a - Still Je	e: ennifer Rebecca agler Street, Suit	Failla e 2250
registered agent and/or the new registered of New Registered Agent:	n/a - Still Je 44 West Fla	ennifer Rebecca agler Street, Suit Enter Florida City	Failla e 2250 street address 33130

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

· Authorized Member being added or removed from our records:

MGR = Manager AMBR = Authorized Member <u>Title</u> <u>Name</u> **Address Type of Action** _□ Add _□ Remove _ Add ☐ Remove ____ □ Add □ Remove _D Add ____ □ Remove _□ Add ☐ Remove □ Add □ Remove

	The Principal and Owner are the same: Jennifer
Hebecca Fallia. The	e main offices have moved to 44 West Flagler Street,
Suite 2250, Miami,	FL 33130 FROM 444 S.W. 24th Road, Miami, FL 33129
 	
	February 14, 2014
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Page 3 of 3

Filing Fee: \$25.00

