# L12000005916

(Re	equestor's Name)			
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(Cit	ty/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
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SECKETARY OF STATE

# **COVER LETTER**

TO: Registration of Division of	on Section f Corporations	
<sub>SUBJECT</sub> . Blac	ckstone Wealth Ma	anagement LLC.
56565611		ited Liability Company
The enclosed Article	es of Organization and fee(s) are	submitted for filing.
Please return all cor	respondence concerning this ma	tter to the following:
Alexan	der J. Blackstone	
		Name of Person
Blacks	tone Wealth Mana	gement LLC.
		Firm/Company
501 S.	Moody Ave. #1129	Α
		Address
Tampa,	FL 33609	
		ity/State and Zip Code
<u>ajblackst</u>	one@gmail.com E-mail address: (to be used	for future annual report notification)
For further informate	tion concerning this matter, pleas	
Alexander J. I	Blackstone	at ( 813 ) 380-9890
N:	ame of Person	Area Code & Daytime Telephone Number
Enclosed is a chec	k for the following amount:	
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & \$160.00 Filing Fee, Certified Copy (additional copy is enclosed)  \$160.00 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

#### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

#### **ARTICLE I - Name:**

The name of the Limited Liability Company is:

## Blackstone Wealth Management LLC.

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

#### **ARTICLE II - Address:**

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:	<b>Mailing Address:</b>			
501 S. Moody Ave. #1129A	501 S. Moody Ave. #1129A			
Tampa, FL 33609	Tampa, FL 33609	<del></del>		
ARTICLE III - Registered Agent, R (The Limited Liability Company cannot serve as it business entity with an active Florida registration) The name and the Florida street addre		Signature: lual or another		
Alexander J. B	lackstone	ASSI ARY ASSI		
	Name			
501 S. Moo	dy Ave. #1129A	# 2: FLO		
Floric	da street address (P.O. Box NOT acceptable)	홍조 <b>2</b>		
Tampa	<sub>FI</sub> 33609	<b>&gt;</b> '''		

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating 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..

City, State, and Zip

Registered Agent's Signature (REQUIRED)

(CONTINUED)

### ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:	Name and Address:
"MGR" = Manager "MGRM" = Managing Member	
President	Alexander J. Blackstone
	501 S. Moody Ave. #1129A
	Tampa, FL 33609
9,000	
(Use attachment if necessary)	
ICLE V: Effective date if other than the	he date of filing: (OPTIONAL)
effective date is listed, the date must	be specific and cannot be more than five business days prior
90 days after the date of filing.)	
REQUIRED SIGNATURE:	<b></b>
REQUIRED SIGNATURE:	
	ber or an authorized representative of a member.
, and the second	ber or all authorized representative of a member.
constitutes an affirmation un I am aware that any false info	der the penalties of perjury that the facts stated herein abstruction of this document of submitted in a document to the Department of submitted only as provided for in s.817.155, F.S.)
Alexander J.	my to provide to motor, they

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Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)

Typed or printed name of signee