

L12000098283

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

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2013 AUG 28 PM 3:58

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

AUG 29 2013

J. BRYAN



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 14, 2013

THOMAS ANTHONY GUERRIERO
OXFORD CITY FOOTBALL CLUB, INC.
10 FAIRWAY DRIVE, SUITE 302
DEERFIELD BEACH, FL 33441

SUBJECT: WMX WEALTH ADVISORS, LLC
Ref. Number: L12000098283

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TALLAHASSEE, FLORIDA

We have received your document for WMX WEALTH ADVISORS, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You completed the wrong form

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Joey Bryan
Regulatory Specialist II

Letter Number: 813A00019417

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: WMX Wealth Advisors, LLC
Name of Limited Liability Company

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TALLAHASSEE, FLORIDA

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Thomas Anthony Guemero
Name of Person

WMX WEALTH ADVISORS, LLC.
Firm/Company

10 Fairway Drive, Suite 302
Address

Deerfield Beach, FL 33441
City/State and Zip Code

dlovera@oxfordcityfc.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Thomas Anthony Guemero at (617) 501-6706
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- ☒ \$25.00 Filing Fee
(check was sent for \$35.00 on 8/6/13.)
- ☐ \$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

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

WMX Wealth Advisors, LLC

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

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TALLAHASSEE, FLORIDA
SECRETARY OF STATE

The Articles of Organization for this Limited Liability Company were filed on 7/31/12 and assigned
Florida document number L12000098283

This amendment is submitted to amend the following:

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

Oxford City Investments, LLC.

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:

N/A

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

N/A

(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

Florida

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 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 Changing Registered Agent, Signature of New Registered Agent

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

<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"/> Add
			<input type="checkbox"/> Remove
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 PALM BEACH, FLORIDA

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

Dated _____



Signature of a member or authorized representative of a member

Thomas Anthony Guerriero

Typed or printed name of signer

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Filing Fee: \$25.00

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