

L12000100816

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

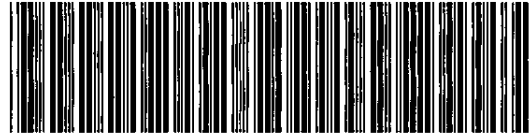
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000238372890

08/13/12--01011--018 **25.00

FILED
12 AUG 13 AM 10:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

C. LEWIS
AUG 14 2012
EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Wealth Migrate Investments LLC

Name of Limited Liability Company

Dear Sir or Madam:

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

Please return all correspondence concerning this matter to the following:

Adrian Brion

Name of Person

Form-A-Corp.com

Firm/Company

4400 PGA Blvd., Suite 900

Address

Palm Beach Gardens, FL 33410

City/State and Zip Code

abrion@form-a-corp.com

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

For further information concerning this matter, please call:

Adrian Brion

Name of Person

at (561)

935-4062

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

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

MAILING ADDRESS:

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

Enclosed is a check for the following amount:

- ☒ \$25 Filing Fee ☐ \$30 Filing Fee & Certificate of Status ☐ \$55 Filing Fee & Certified Copy ☐ \$60 Filing Fee, Certificate of Status & Certified Copy

CR2E062 (08/05)

**ARTICLES OF CORRECTION
FOR
FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY**

Pursuant to section 608.4115, F.S., this document is being submitted **within the required 30 business days** to correct the **attached** articles of organization or application to transact business in Florida.

L12000100816

FIRST: The name of the limited liability company is:
 Wealth Migrate Investments LLC

SECOND: The articles of organization or the application to transact business

(CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT)

- ☒ Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows:
Article 5 should be 4 Members not 1 Member.

The 4 members are as follows: Scott Picken, Hendrik Bezuidenhoudt,

Brendon Brown and Neale Peterson all using 5728 Major Blvd., Suite 501

Oriando, FL 32819 as their address.

OR

- ☐ Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows:

Dated: August 8th, 2012

Adrian Brion
Signature of a member or authorized representative of a member

Adrian Brion
Typed or printed name of signee

Filing Fee: \$25.00
Certified Copy: \$30.00 (optional)

FILED
12 AUG 13 AM 10:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**Electronic Articles of Organization
For
Florida Limited Liability Company**

L12000100816
FILED 8:00 AM
August 06, 2012
Sec. Of State
clewis

Article I

The name of the Limited Liability Company is:
WEALTH MIGRATE INVESTMENTS LLC

Article II

The street address of the principal office of the Limited Liability Company is:
5728 MAJOR BLVD.
SUITE 501
ORLANDO, FL. US 32819

The mailing address of the Limited Liability Company is:
5728 MAJOR BLVD.
SUITE 501
ORLANDO, FL. US 32819

Article III

The purpose for which this Limited Liability Company is organized is:
ANY AND ALL LAWFUL BUSINESS.

Article IV

The name and Florida street address of the registered agent is:
BALDWIN ACCOUNTING, CPA, P.A.
5728 MAJOR BLVD.
SUITE 501
ORLANDO, FL. 32819

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.

Registered Agent Signature: TODD BALDWIN

Article V

The name and address of managing members/managers are:

Title: MGRM
SCOTT PICKEN
5728 MAJOR BLVD., SUITE 501
ORLANDO, FL. 32819 US

L12000100816
FILED 8:00 AM
August 06, 2012
Sec. Of State
clewis

Signature of member or an authorized representative of a member

Electronic Signature: ADRIAN BRION

I am the member or authorized representative submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.