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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803

Fax Number : (855)330-1010

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

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## LLC REGISTERED AGENT CHANGE WEALTHCORE FINANCIAL LLC

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NOV 2 9 2021

S. PRATHEF

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## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1.	Name of the limited liability company: $\overline{WEA}$	LIHCORE FINAN	NCIAL LLC	
2. (a	803 Shotgun Road	<sub>(b)</sub> 803 Shotg	un Road	
	Principal office address of limited liability comp (Note: MUST BE STREET ADDRESS)	•	ng address of limited liability company te: MAY BE POST OFFICE BOX)	:
	Sunrise, FL 33326	Sunrise, F		
	12/14/12	L12000156	540	
3.	Date of filing/registration in Florida	4. Doc	rument number	····
5. (	a) UNITED STATES CORPORATION AC	GENTS, INC.		
J. (	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:			
	5575 S. SEMORAN BLVD			
	Registered Office Address (MUST BE FLORIDA ST	TREET ADDRESS)	ובר) רבלי	
	SUITE 36		2021 NOV 24 SEURĖ ISAY ALLAHASSE	الة
	ORLANDO	32822	24 SSEE	البا ا ا
(t	, Northwest Registered Age	ent LLC	AM 9: FLOF	
	Enter name of NEW Registered Agent and/or NEW Registered Office address:		9: 50 TATE ORIDA	
	7901 4th St N		ــ و	
	NEW Registered Office Address:			
	STE 300			
	St. Petersburg	. FL 33702		
			_	

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Signature of a number or authorized representative of a member	Morgan Noble	
	Printed or typed name of signee	

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.

Glover - Assistant Secretary

Signature of Registered Agent