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J. HARRIS

COVER LETTER

-		
Holdings, LLC		
(additional copy is enclosed) Certified Copy		
Amendment and fee(s) are sub	mitted for filing.	
indence concerning this matter	to the following:	
	Josh N. Bennett	
	Name of Person	
Josh I	N. Bennett, Esq., P.A.	
440 No	orth Andrews Avenue	
	Address	
Fort	Lauderdale, FL 33301	
	City/State and Zip Code	
		
		ration)
oncerning this matter, please ca	all:	
	at (954) 779-1661	l .
f Person	Area Code Daytime	Telephone Number
he following amount:		
	Certified Copy	Certificate of Status &
	Name of Limit Amendment and fee(s) are substituted and fee(s) are substitu	Name of Limited Liability Company Amendment and fee(s) are submitted for filing. I Josh N. Bennett Name of Person Josh N. Bennett, Esq., P.A. Firm/Company 440 North Andrews Avenue Address Fort Lauderdale, FL 33301 City/State and Zip Code giovanna@palimi.net E-mail address: (to be used for future annual report notification oncerning this matter, please call: at (954) 779-1661 Area Code Daytime the following amount: \$\textstyle \text{33.00 Filing Fee & Certificate of Status} \textstyle \text{S55.00 Filing Fee & Certified Copy}

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

Nimble Holdings, LLC						
(Name of the Limited Lin (A Fig.	ability Company orida Limited Lie	y as it now appears shility Company)	on our records.)	·		
The Articles of Organization for this Limited Liability Florida document numberL14000159738	ty Company w	vere filed on 10	0/09/2014	8	nd assi	gned
This amendment is submitted to amend the following	 .					
A. If amending name, enter the new name of the	limited liabili	ity company hei	<u>re</u> :	•		
Wealth Institute Holdings, LLC				•		
The new name must be distinguishable and contain the words	Limited Liabilit	y Company," the de	signation "LLC" or ti	he abbrevia:	ion "L.l	.C."
Enter new principal offices address, if applicable	e:	14 W MT V	ernon PL			
(Principal office address MUST BE A STREET A	DDRESS)	Baltimore, N	4D 21201] + F3	ed#	44.
·				· .	劼	
					ند	- 1:2 ·
Enter new mailing address, if applicable:					=======================================	<u>. </u>
(Mailing address MAY BE A POST OFFICE BOX	2					. <u>—</u>
					<u></u>	
					<i>16.</i>	
B. If amending the registered agent and/or registered agent and/or the new registered office a			our records, en	iter the i	name (of the nev
Name of New Registered Agent:	Giovanna	Koo				
New Registered Office Address:	235 NE 4th	n Avenue, Suite	101			
		Enter Flori	da street address			
	Delray Bea	ich Cin	, Florid:		3 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 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.

If Changing Registered Agent, Signature of New Registered Agent

Page 1 of 3

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
AMBR	Matt Turner	17 W MT Vernon PL	
		Baltimore, MD 21201	N Remove
			Change
MGR	Monument & Cathedral Holdings, Inc.	14 W MT Vernon PL	∑ Add
		Baltimore, MD 21201	□ Remove
			Change
			□ Remove
			☐ Change-
			Add
			□ Remove
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iote: If i ocument e recor	he date inserted in this block do 's effective date on the Departn	ective date, but not an effective time, at	ents, this date will not be listed a	as the
ated	October 31	, 2017		
	_	Minister		
	Signs	ture of a member or authorized representative of a memb	er E	2817
		Matt Turner	127 251	II KCY
		Typed or printed name of signee		3
		Page 3 of 3	 	<u> </u>
		Filing Fee: \$25.00	·· :	