

L14000185343

Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850) 617-6383

From: Account Name : FANELLI LAW FIRM, PA
Account Number : I20120000059
Phone : (813) 384-4841
Fax Number : (813) 749-9475

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

Email Address: jfanelli@fanellilaw.com

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
TRUCLARITY WEALTH ADVISORS - FORT LAUDERDALE, LLC**

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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JUN 26 2015
J. HARRIS

(((H15000156910.3)))

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TRUCLARITY WEALTH ADVISORS - FORT LAUDERDALE, LLC

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

The Articles of Organization for this Limited Liability Company were filed on March 12, 2015 and assigned
Florida document number L14000185343

This amendment is submitted to amend the following:

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

LAS OLAS CAPITAL ADVISORS, LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address **MUST BE A STREET ADDRESS**)

Enter new mailing address, if applicable:

(Mailing address **MAY BE A POST OFFICE BOX**)

FILED
15 JUN 25 AM 9:06
CLERK OF DISTRICT COURT
JULIA A. SEFTON, CLERK
TALLAHASSEE, FLORIDA

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:

Fanelli Law Firm, PA

New Registered Office Address:

5300 W. Cypress St., Ste. 200

Enter Florida street address

Tampa

Florida 33607

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 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

(((H15000156910-3)))

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>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	CRAIG BUTLER	5300 W. Cypress St., Ste. 200	☐ Add
		Tampa, FL 33607	☒ Remove
			☐ Change
AMBR	DARIAN W. JOHNSON	5300 W. Cypress St., Ste. 200	☐ Add
		Tampa, FL 33607	☒ Remove
			☐ Change
AR	PAMELA J. STROSS	5300 W. Cypress St., Ste. 200	☐ Add
		Tampa, FL 33607	☒ Remove
			☐ Change
MGR	TRUCLARITY HOLDINGS, LLC	5300 W. Cypress St., Ste. 200	☒ Add
		Tampa, FL 33607	☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change

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STATE OF FLORIDA
CLERK OF THE CIRCUIT COURT

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

E. Effective date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

(b) The 90th day after the record is filed.

Dated June 25 2015

[Signature]

Signature of a member or authorized representative of a member

Darian W. Johnson, CEO of Member

Typed or printed name of signee

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TALLAHASSEE, FLORIDA