

8/3/2015

Aug. 3. 2015 12:22PM

L15000127674

Division of Corporations

Florida Department of State

Division of Corporations

Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : SPOOR LAW, P.A.
Account Number : I20110000021
Phone : (727)822-4355
Fax Number : (727)209-3467

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

Email Address: jbshulman@tampabay.rr.com

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
SHERPA WEALTH PARTNERS, LLC**

Certificate of Status	0
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15 AUG -3 PM 12:49

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

2015 AUG -3 AM 8:07

Electronic Filing Menu

Corporate Filing Menu

Help

Aug. 3. 2015 12:22PM

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

FILED 2110 P. 2

2015 AUG -3 AM 8:07

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SHERPA WEALTH PARTNERS, 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 July 28, 2015 and assigned
Florida document number L15000127674

This amendment is submitted to amend the following:

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

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)

**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

City, Florida 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

Aug. 3. 2015 12:22PM

No. 2110 P. 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>
MGR	JOSHUA SHULMAN	2817 62nd Street N.	<input type="checkbox"/> Add
		St. Petersburg, Florida 33710	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	PAMELA PRICE	2817 62nd St. N.	<input type="checkbox"/> Add
		St. Petersburg, Florida 33710	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	RUSTY SPOOR	111 2nd Avenue NE, Suite 1600	<input checked="" type="checkbox"/> Add
		St. Petersburg, Florida 33701	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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Aug. 3. 2015 12:22PM No. 2110 P. 4
D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

P. 4

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(optional)

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If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

Dated August 3, 2015

Signature of a member or authorized representative of a member

James R. Spoor

Typed or printed name of signee