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CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : I2000000195 REFERENCE : 304612 AUTHORIZATION COST LIMIT ORDER DATE: July 17, 2018 ORDER TIME : 1:25 PM ORDER NO. : 304612-010 CUSTOMER NO: 8076439 DOMESTIC AMENDMENT FILING WEALTHOUSE ASSETS MANAGEMENT NAME: LLCEFFECTIVE DATE: XX __ ARTICLES OF AMENDMENT ____ RESTATED ARTICLES OF INCORPORATION PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: CERTIFIED COPY XX PLAIN STAMPED COPY _ CERTIFICATE OF GOOD STANDING

EXAMINER'S INITIALS:

CONTACT PERSON: Emily Croft -- EXT# 62925

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

WEALTHOUSE ASSETS MANAGEMENT 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 12/29/2015 and assigned
Florida document number <u>L15000212863</u>	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	oility company here:
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "L.L.C" or the abbreogration "L.L.C"
Enter new principal offices address, if applicable:	390 North Orange Avenue
(Principal office address MUST BE A STREET ADDRESS)	Orlando, Fl.32801 2 2
Enter new mailing address, if applicable:	390 North Orange Avenue
(Mailing address MAY BE A POST OFFICE BOX)	Orlando, FL32801 Orlando,
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, enter the name of the new registered
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	, Florida
City	Zin 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>	<u>Name</u>	Address	Type of Action
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Page 3 of 3 Filing Fee: \$25.00