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COVER LETTER

Division of Corporations	
Wealth Advisor Video LLC SUBJECT:	
	imited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Ch	ange and fee(s) are submitted for filing.
Please return all correspondence concerning this mate	ter to the following:
Jonathan Bentley	
Name of Person	
Wealth Advisor Video, LLC	
Firm/Company	
5400 Palmetto Road	
Address	
NPR FL 34652	
City/State and Zip Code	
jpbentley2011@gmail.com	
E-mail address: (to be used for future annual re	port notification)
For further information concerning this matter, please	e call:
Jonathan Bentley at (727 515 9273
Name of Person	Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations Clifton Building	Division of Corporations P.O. Box 6327
2661 Executive Center Circle	Tallahassee, Florida 32314
Tallahassee, Florida 32301	3231
Enclosed is a check for the following amou	nt:
☑ \$25 Filing Fee	S55 Filing Fee & Certified Copy
INHS18 (2/14)	

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: Wealth Adviso	r Vid	deo, LLC
2. (a	7080 Hollywood Blyd, Suite 1100		(b) 5400 Palmetto Road
2. (0	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Los Angeles		New Port Richey
	CA 90028	_	FL 34652
	08/08/16		L16000127489
3.	Date of filing/registration in Florida	4.	Document number
5. (:	Legal Corporate Services Inc.		
J. (.	Registered Agent and Registered Office shown on the records of the	ne Flori	rida Dept. of State:
	5237 Summerlin Commons		
	Registered Office Address (MUST BE FLORIDA STREET A	DDRE.	ESS)
	Suite 400		1
	Fort Meyers . FL	3390	7: 07 07 08
(b	Enter name of NEW Registered Agent and/or NEW Registered G	Office :	address:
	NEW Registered Office Address:	- -	
	New Port Richey FL	3465	52
the clagent was/v	limited liability company is not organized under the law hange or changes are made, the Florida street address of a will be identical. Or, in the case of a Florida limited lial were authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the l	the reg bility () the li	egistered office and the business office of the registered company, it is hereby confirmed that the change(s) limited liability company or as otherwise provided in
	V. D.	Jo	onathan Bentley
I her provi the or to me notifi	nature of a member or authorized representative of a member reby accept the approintment as registered agent and agressions of all statutes relative to the proper and complete policy actions of my position as registered agent as provided rely reflect a change in the registered office address, I have a first of this change. Ture of Resistered Agent	erfori	rmunce of my duties, and I am familiar with and accent
	Division of Corporations P.O. Be	ox 632	327• Taltahassec, FL 32314

FILING FEE: \$25.00