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(Address)					
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PICK-UP	☐ WAIT	MAIL			
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(Document Number)					
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COVER LETTER

TO:	Registration Section Division of Corporations		
	Division of Corporations		
SUBJ	Weiser Financial LLC		
	Nan	me of Limited	Liability Company
Dear S	Sir or Madam:		
The e	nclosed Registered Agent/Registered Of	fice Change a	nd fee(s) are submitted for filing.
Please	e return all correspondence concerning the	nis matter to t	he following:
Cory	Weiser		
•	Name of Person		
Weis	ser Financial LLC		
	Firm/Company		
6146	Keenes Pointe Dr		
	Address		 _
Wind	dermere, FL 34786		
	City/State and Zip Code		
Cory	_Weiser@yahoo.com		
	E-mail address: (to be used for future an	nual report no	tification)
For fu	rther information concerning this matter	; please call:	
Cory	Weiser	609	932-6740
	Name of Person		Area Code & Daytime Telephone Number
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
	Enclosed is a check for the following	•	
	☑ \$25 Filing Fee		\$55 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. Na	ame of the limited liability company: Weiser Finan	cial LLC	
2. (a)	Weiser Financial LLC	(b) Weise	r Financial LLC
()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	301 E. Pine St. Suite 800	6146 K	Keenes Pointe Dr
	Orlando, FL 32801	Winde	rmere, FL 34786
	03/27/2017	L17000	068577
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	Cory A Weiser		
,. (u)	Registered Agent and Registered Office shown on the records of	the Florida Dept, of St	ate:
	Weiser Financial LLC		C/2 6
	Registered Office Address (MUST BE FLORIDA STREET)	ADDRESS)	-
	2115 Candlenut Circle		量工
	Apopka	32712	FILED July 26 PH
	, 112	,	- RH 12:
(b)	Cory A Weiser		
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office address:	_
	Weiser Financial LLC		
	NEW Registered Office Address:		_
	6146 Keenes Pointe Dr		<u></u>
	Windermere	34786	
he cha igent v vas/we he arti	imited liability company is not organized under the lay ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liagree authorized by an affirmative vote of the members of icles of organization or the operating agreement of the ture of a member or authorized representative of a member	the registered offi ability company, it of the limited liabil	ce and the business office of the registered is hereby confirmed that the change(s) ity company or as otherwise provided in ompany.
l herei provisi he obl	by accept the appointment as registered agent and agrions of all statutes relative to the proper and complete ligations of my position as registered agent as provided by reflect a change in the registered office address, I have writing of this change.	nerformance of m	pacity. I further agree to comply with the values, and I am familiar with and accept