L18000064496

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		istration Secti sion of Corpo			
eunico	· · · · ·	BURLEIGH	ADVISORS LLC	er A	
SUBJEC	.1:		Name of Lim	nited Liability Company	
			mendment and fee(s) are sub	•	
		·	GEOFFREY L WEBSTER		
				Name of Person	
				Firm/Company	
			319 Clematis St. Suite 213	3	
				Address	
			WEST PALM BEACH, F	FL 33401	
				City/State and Zip Code	
			geoffwebster@me.com		
For further	er in	formation con	E-mail address: (cerning this matter, please c	(to be used for future annual report notification)	
GEOFFE	REY	L WEBSTER		561 601-9146	
		Name of P	erson	Area Code Daytime Telephone Number 200 SEP 2	Z.
Enclosed	is a	check for the	following amount:	29 ·	-
≘ \$25.0	00 F	iling Fee	□ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & S60.00 Filing Fee. Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed) (additional copy is inclosed)	-7

Mailing Address: Registration Section Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BURLEIGH ADVISORS 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 03/12/2018 and assigned Florida document number ____L18000064496 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: **BURLEIGH GROUP LLC** The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 319 Clematis St. Suite 213 Enter new principal offices address, if applicable: West Palm Beach FL 33401 (Principal office address MUST BE A STREET ADDRESS) 319 Clematis St. Suite 213 Enter new mailing address, if applicable: West Palm Beach FL 33401 (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

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.

Cin

If Changing Registered Agent, Signature of New Registered Agent

, Florida

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
MGR	WEBSTER, GEOFFREY L	319 Clematis St. Suite 213 West Palm Beach FL 334	01 □Add
			□Remove
			□Add
			□Remove
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