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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificate	s of Status
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COVER LETTER

Div	ision of Corp	orations			
SHD IVATE	WEALTH A	CCOUNTING LLC			
SUBJECT.		Name of Limi	ted Liability Company		
The enclosed	l Articles of A	mendment and fec(s) are sub-	nitted for filing.		
Please return	all correspond	dence concerning this matter	to the following:		
		GABRIEL HATEM			
			Name of Person	 	
		TAX CARE DORAL			
			Firm/Company		
		1400 NW 107TH AVE ST	E 430		
			Address		
		SWEETWATER FL 3317.	2		
			City/State and Zip Code		
		GABRIEL@TAXCAREIN			
			o be used for future annual report not	ification)	ے <u>ہے</u> اور
For further in	iformation cor	ncerning this matter, please co	ill:		13 0C1
GABRIEL I	LATEM		786 8458854		
	Name of I	² erson	Area Code Daytii	ne Telephone Number	
Enclosed is a	check for the	following amount:			11 5: 5a
■ \$25,00 F	iling Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of State Certified Copy cadditional copy is enc	18 &

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

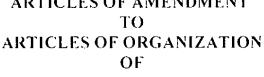
TO:

Registration Section

STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT **OF**



	ES OF AMENDMENT TO	6
ARTICLE	ES OF ORGANIZATION	9 9
	OF	100 B # 9.0
		74
WEALTH ACCOUNTING LLC (Name of the Limited Liab)	ility Company as it now appears on our records.)	
(A Flori	ility Company as it now appears on our records.) ida Limited Liability Company)	ړن
The Articles of Organization for this Limited Liability	Company were filed on 06/20/2018	
lorida document number L18000151507		
his amendment is submitted to amend the following:		
ins antendment is submitted to amend the following.		
a. If amending name, <u>enter the new name of the lir</u>	mited liability company here:	
he new name must be distinguishable and contain the words "Li	imited Liability Company," the designation "LLC" or the	he abbreviation "L.L.C."
Inter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADI	DRESS)	
Inter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
3. If amending the registered agent and/or reg		ter the name of the
egistered agent and/or the new registered office ad	idress nere:	
NE CONTRACTOR OF THE CONTRACTO		
Name of New Registered Agent:		
Name of New Registered Agent: New Registered Office Address:	25	······································
	Emer Florida street address	
	Emer Florida street address , Florid:	l

New Registered Agent's Signature, if changing Registered Agent:

Thereby 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

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	MARCO ALFARO		Add
			□ Remove
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Effect	tive date, if other than	the date of filing	10/16/2019		(marking all)	
l'an et	fective date is listed, the date	must be specific and	cannot be prior to da	te of tiling or more th	(optional) an 90 days after filing.) Pu	rsuant to 605,021
docun	If the date inserted in thi nent's effective date on th	s block does not m e Department of S	eet the applicable tate's records.	statutory filing requ	airements, this date wil	l not be listed a
he re The	cord specifies a dela e 90th day after the	yed effective d record is filed.	ate, but not ar	effective time,	at 12:01 a.m. on	the earlier o
Dated	OCTOBER 10		2019			

Page 3 of 3

Filing Fee: \$25.00

Typed or printed name of signee