

L18000184677

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(City/State/Zip/Phone #)

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18 SEP 25 PM 10:55  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

K SALY  
SEP 27 2018

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** Renew Family Wealth LLC

\_\_\_\_\_  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Hayden Dawes

\_\_\_\_\_  
Name of Person

Renew Family Wealth LLC

\_\_\_\_\_  
Firm/Company

777 S. Flagler Dr - Ste 800 West

\_\_\_\_\_  
Address

West Palm Beach, FL 33401

\_\_\_\_\_  
City/State and Zip Code

info@renewfamily.com

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Hayden Dawes

561 310-4379  
at ( )

\_\_\_\_\_  
Name of Person

\_\_\_\_\_  
Area Code

\_\_\_\_\_  
Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &  
Certificate of Status

☐ \$55.00 Filing Fee &  
Certified Copy  
(additional copy is enclosed)

☐ \$60.00 Filing Fee,  
Certificate of Status &  
Certified Copy  
(additional copy is enclosed)

**MAILING ADDRESS:**

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

**STREET/COURIER ADDRESS:**

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

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

**FILED**  
**18 SEP 25 PM 10:56**  
**SECRETARY OF STATE**  
**TALLAHASSEE, FLORIDA**

Renew Family Wealth 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 08/01/2018 and assigned  
Florida document number L18000184677.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "L.L.C." or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

777 SOUTH FLAGLER DRIVE

SUITE 800 - WEST

WEST PALM BEACH, FL 33401

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

777 SOUTH FLAGLER DRIVE

SUITE 800 - WEST

WEST PALM BEACH, FL 33401

**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:

Hayden Dawes

New Registered Office Address:

777 SOUTH FLAGLER DRIVE SUITE 800 - WEST

*Enter Florida street address*

WEST PALM BEACH

*City*

Florida 33401

*Zip 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

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>	<u>Address</u>	<u>Type of Action</u>
AMBR	Scott D Miller	777 SOUTH FLAGLER DRIVE	<input checked="" type="checkbox"/> Add
		SUITE 800 - WEST	<input type="checkbox"/> Remove
		WEST PALM BEACH, FL 33401	<input type="checkbox"/> Change
AMBR	Hayden A Dawes	777 SOUTH FLAGLER DRIVE	<input type="checkbox"/> Add
		SUITE 800 - WEST	<input type="checkbox"/> Remove
		WEST PALM BEACH, FL 33401	<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

18 SEP 25 PM 4:56  
 SCOTT D MILLER  
 HALL COUNTY, FLORIDA

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**D. If amending any other information, enter change(s) here:** *(Attach additional sheets, if necessary.)*

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U.S. DISTRICT COURT  
NORTH FLORIDA  
TALLAHASSEE, FLORIDA

E. Effective date, if other than the date of filing: Sept. 20<sup>th</sup> 2018 (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated September 20th 2018

Signature of a member or authorized representative of a member

Hayden Dawes

Typed or printed name of signee