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**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.**

To:

Division of Corporations  
Fax Number : (850) 617-6383

From:

Account Name : CAPITOL SERVICES, INC.  
Account Number : 120160000017  
Phone : (855) 498-5500  
Fax Number : (800) 432-3622

2019 APR -8 AM 9:42  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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AND  
FILED

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

**Email Address:** \_\_\_\_\_

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
IDX ADVISORS, LLC**

|                       |         |
|-----------------------|---------|
| Certificate of Status | 0       |
| Certified Copy        | 1       |
| Page Count            | 05      |
| Estimated Charge      | \$55.00 |

2019 APR -8 PM 4:31

*Handwritten signature/initials*

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** IDX Advisors, 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:

Kimberly Westfall

Name of Person

Weiss Brown

Firm/Company

6263 N. Scottsdale Rd., STE 100

Address

Scottsdale, AZ 85250

City/State and Zip Code

mcmillan.ben@gmail.com

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

For further information concerning this matter, please call:

Kimberly Westfall

at (480)

327-6669

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

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SECRETARY OF STATE  
TALLAHASSEE, FL 32301

DocuSign Envelope ID: CFDE270C-E502-4049-BD89-8B018800169F

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

IDX 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 October 31, 2018 and assigned  
Florida document number L18000258306.

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 "LLC" or the abbreviation "L.L.C."

Enter new principal office address, if applicable:

(Principal office address MUST BE A STREET ADDRESS.)

Enter new mailing address, if applicable:

(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: Capitol Corporate Services, Inc.

New Registered Office Address: 515 E Park Avenue Floor 2

*Enter Florida street address*

Tallahassee, Florida 32301

*City*

*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.*

*Kim Tadlock*

Kim Tadlock, Asst. Sec. on behalf  
of Capitol Corporate Services, Inc.

If Changing Registered Agent, Signature of New Registered Agent

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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         | Janelle Bosek     | 208 Haven Beach Ct.<br>Indian Rocks Beach, FL 33785 | <input type="checkbox"/> Add<br><input checked="" type="checkbox"/> Remove |
|              |                   |                                                     | <input type="checkbox"/> Change                                            |
| AMBR         | Benjamin McMillan | 208 Haven Beach Ct.<br>Indian Rocks Beach, FL 33785 | <input type="checkbox"/> Add<br><input checked="" type="checkbox"/> Remove |
|              |                   |                                                     | <input type="checkbox"/> Change                                            |
| AMBR         | IDX Global, LLC   | 600 Cleveland St., Ste 324<br>Clearwater, FL 33755  | <input type="checkbox"/> Add<br><input checked="" type="checkbox"/> Remove |
|              |                   |                                                     | <input type="checkbox"/> Change                                            |
|              |                   |                                                     | <input type="checkbox"/> Add                                               |
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(b) The 90th day after the record is filed.

Dated April 8, 2019

Signed by  
 Benjamin McMillan  
 Signature of a member or authorized representative of a club  
 Benjamin McMillan  
 Typed or printed name of signer