

120 000126838

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

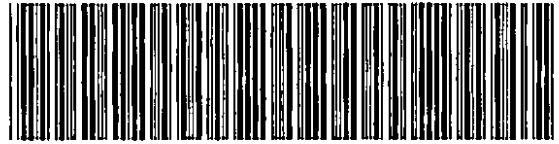
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03/04/22 --01063--020 **43.75

FILED

2022 APR 18 PM 2:48

SECRETARY OF STATE
TALLAHASSEE, FL

g 4/23/2022

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: WEALTH AND FINANCIAL SERVICES 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:

ADELKIS M DIAZ
Name of Person

WEALTH AND FINANCIAL SERVICES LLC
Firm/Company

16861 NW 82 AVE
Address

MIAMI LAKES FL 33011
City/State and Zip Code

WEALTHANDFINANCIAL@GMAIL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ADELKIS DIAZ at (786) 487-4484
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 Address:

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED

2022 APR 18 AM 11:46

SECRETARY OF STATE
TALLAHASSEE, FL

March 11, 2022

ADELKIS M DIAZ
16861 NW 82 AVENUE
MIAMI LAKES, FL 33016

SUBJECT: WEALTH AND FINANCIAL SERVICES LLC
Ref. Number: L20000126838

We have received your document for WEALTH AND FINANCIAL SERVICES LLC and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a Benefit/Social Corporation, but your entity is a Limited Liability Company. Please complete and return the enclosed blank form(s).

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Claretha Golden
Regulatory Specialist II

Letter Number: 422A00005823

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

WEALTH AND FINANCIAL SERVICES LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

FILED
2022 APR 18 PM 2:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 05/11/2020 and assigned
Florida document number L20000126838.

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 offices 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:

ADELKIS M DIAZ

New Registered Office Address:

16861 NW 82 AVE

Enter Florida street address

MIAMI LAKES

City

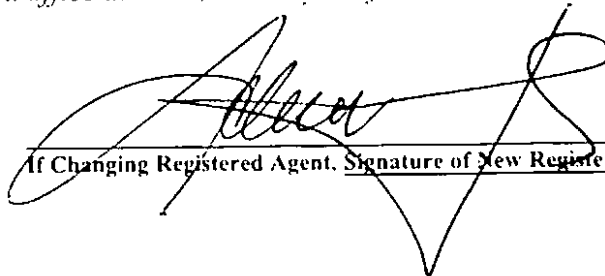
Florida

33016

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	ADOLFO DIAZ J.	1200 SW 137 AVE 1200 SW 137 AVE	<input type="checkbox"/> Add
		UNIT # E304	<input checked="" type="checkbox"/> Remove
		PEMBROKE PINES, FL 33027	<input type="checkbox"/> Change
AMBR	CHRISTINE M. DIAZ	16861 NW 82 AVE	<input checked="" type="checkbox"/> Add
		MIAMI LAKES, FL 33016	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Change

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

(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)

Dated 04/11/2022

ADELKIS DIA 2^V

Filing Fee: \$25.00