

L20000 142272

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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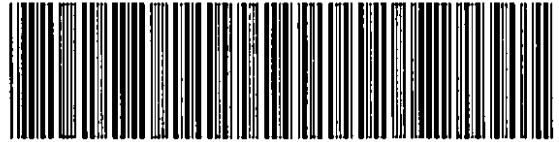
(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Select Retirement 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:

Jose A. Cruz
Name of Person

Select Retirement Wealth, LLC
Firm/Company

3777 NW 78th Ave, unit 9C
Address

Hollywood, FL 33024
City/State and Zip Code

joecruzselect@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jose A. Cruz at (786) 704-1890
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

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

NOV 3 2020

Select Retirement 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 May 26, 2020 and assigned Florida document number LR 0000142272

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: _____

New Registered Office Address: _____

Enter Florida street address

_____, Florida _____
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.

If Changing Registered Agent, Signature of New Registered Agent

[illegible]

**Electronic Articles of Organization
For
Florida Limited Liability Company**

L20000142272
FILED 8:00 AM
May 26, 2020
Sec. Of State
wlawrence

Article I

The name of the Limited Liability Company is:
SELECT RETIREMENT WEALTH, LLC

Article II

The street address of the principal office of the Limited Liability Company is:
3850 BIRD RD.
UNIT 1001
CORAL GABLES, FL. 33146

The mailing address of the Limited Liability Company is:
3777 N.W. 78TH AVENUE
UNIT 9C
DAVIE, FL. UN 33024

Article III

Other provisions, if any:

RETIREMENT PLANNING WITH A FOCUS ON ECONOMIC STABILITY
THROUGH WEALTH CREATION FOR THE PURPOSE OF A FINANCIALLY
SECURE RETIREMENT.

Article IV

The name and Florida street address of the registered agent is:
JOSE A CRUZ
3850 BIRD RD.
UNIT 1001
CORAL GABLES, FL. 33146

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Registered Agent Signature: JOSE CRUZ

Article V

The effective date for this Limited Liability Company shall be:
05/25/2020

Signature of member or an authorized representative

Electronic Signature: JOSE A. CRUZ

I am the member or authorized representative submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.

State of Florida Department of State

I certify the attached is a true and correct copy of the Articles of Organization of SELECT RETIREMENT WEALTH, LLC, a limited liability company organized under the laws of the state of Florida, filed electronically on May 26, 2020 effective May 25, 2020, as shown by the records of this office.

I further certify that this is an electronically transmitted certificate authorized by section 15.16, Florida Statutes, and authenticated by the code noted below.

The document number of this limited liability company is L20000142272.

Authentication Code: 200602161519-500345264705#1

Given under my hand and the
Great Seal of the State of Florida
at Tallahassee, the Capital, this the
Second day of June, 2020



A handwritten signature in black ink, appearing to read "Laurel M. Lee".

Laurel M. Lee
Secretary of State