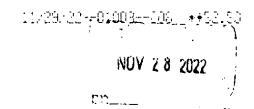
L20000148223

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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3/13/23 V·M.

2023 MAR - 8 PM 1: 23 SECRETARY OF STATE



February 16, 2023

BRADLEY ESSMAN 360 CENTRAL AVE #800 SAINT PETERSBURG, FL 33701 US

SUBJECT: DDT WEALTH LLC Ref. Number: L20000148223

We have received your document and check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The form you submitted is for a INC, but your entity is a LLC. Please complete and return the enclosed blank form(s).

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.

Vonterica S Williams REGULATORY SPECIALIST II

MAR 0 8 2023

Letter Number: 523A00003774

-www.sunbiz.org

Dirit 60 at DO DOM (word mark)

COVER LETTER

TO: Registration Se Division of Cor			
SUBJECT:	DDT Wealth Name of Limi	L C C ted Liability Company	<u> </u>
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	Bryce Bus	Name of Person	
		Firm/Company	
	360 Central	Ave Suite #800	
		Cfly/State and Zip Code	
For further information e	oncerning this matter, please co	ıll:	
Byce Bus	f Person	at (<u>727</u>) <u>251 - 95</u> Area Code Daytim	5-7/ e Telephone Number
Enclosed is a check for the	ne following amount:		
□ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60,00 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

	alth LL		
(Name of the Limit	ed Liability Compa (A Florida Limited L	ny as it now appears on our records.) .iability Company)	-
The Articles of Organization for this Limited Li	iability Company	were filed on	and assigned
Florida document number <u>L2000014827</u>	3		
This amendment is submitted to amend the following	owing:		
A. If amending name, enter the new name of	f the limited liabi	ility company here:	
The new name must be distinguishable and contain the w	ords "Limited Liabil	ity Company," the designation "LLC" or the a	bbreviation "L.L.C."
Enter new principal offices address, if applic	able:	360 Central Ave	
(Principal office address MUST BE A STREE	T ADDRESS)	Suite 800	
		Saini Petersburg Fl	\$370 _/
Enter new mailing address, if applicable:		360 Central Ave Snite #800	
(Mailing address MAY BE A POST OFFICE	BOX)	Suite #800	<u> </u>
		Sam Petersburg Fl.	A R
B. If amending the registered agent and/or ragent and/or the new registered office address	egistered office a ss here:	address on our records, enter the nar	ر ر ک
Name of New Registered Agent:	Genera	1 Coursel US PLLC	
New Registered Office Address:	360 (entral Ave Suite #	800 <u>. </u>
		Historida street address Kishii 19 Florida -	
	Jains le	Cin , riorida -	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>	Name	Address	Type of Action
President	DOT Wealth Trust	360 Central Ave	_ ĹJAdd
		Suik #800	□Remove
Cheit Financial		Saint Petersburg F1 33701	□Change
7.0	For All Funding Timber	360 Central Az	ÆAdd
	J	Suile #800	□Remove
		Saint Petersburg F1 33701	□Change
Sece retary	Hakeem Singletan	525 Fairwood Ave	□Add
		Suite #290	Remove
		Clearwater F1 33759	Change
Schrebary	Destra Chambers	525 For wood Ave	EAdd
	<u></u>	Suik #290	□Remove
		Clearwater F13375	<u> </u>
Truster	Boyce Bush	10631 Packer's Landing C.	<u>l</u> Madd
	·	Town and Country	□Remove
Corpusta		Florida 33615	
	Gerural Counsel Os	360 Central Ave	îDAdd
	,	Suite #808	□Remove
		Saint Petersburg F1337	□Change

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(If an effe <u>Note:</u> I	re date, if other than the date of filing:
the record cord is file	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 d,
Dated _	February 27th 2023
	Signature of a member of authorized t epresentati ve of a member
	Blyce Bicsh Typed or printed name of signce
	Typed or printed name of signee

Filing Fee: \$25.00