

MO3000002471

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

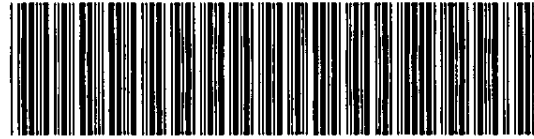
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FILED
16 MAR 21 PM 12:14
TALLAHASSEE, FLORIDA

MAR 24 2016
Y SULKER



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED
2016 MAR 21 PM 4:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

February 19, 2016

DALE E VEITCH
424 CHURCH STREET, SUITE 2000
NASHVILLE, TN 37219

SUBJECT: LEXINGTON INVESTMENT COUNSEL, LLC
Ref. Number: M03000002471

We have received your document for LEXINGTON INVESTMENT COUNSEL, LLC and your check(s) totaling \$150.00. However, the document has not been filed and is being retained in this office for the following:

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return 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) 245-6051.

Yasemin Y Sulker
Regulatory Specialist II

Letter Number: 616A00003505

See attached Proof of Name Changes.

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Lexington Investment Consulting, LLC

Name of Foreign Limited Liability Company

Dear Sir or Madam:

The enclosed application, certificate and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Dale E. Veitch

Name of Person

Lexington Investment Consulting, LLC

Firm/Company

424 Church Street, Suite 2000

Address

Nashville, TN 37219

City/State and Zip Code

dale@lex-life.com

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

For further information concerning this matter, please call:

Dale E. Veitch

Name of Person

at (386) 566-7249

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

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

MAILING ADDRESS:

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

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$30 Filing Fee &
Certificate of Status

☐ \$55 Filing Fee &
Certified Copy

☐ \$60 Filing Fee,
Certificate of Status &
Certified Copy

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE
AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT
BUSINESS IN FLORIDA**

SECTION I (1-4 must be completed)

1. Name of limited liability Company as it appears on the records of the Florida Department of

State: Lexington Investment Counsel, LLC

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)

2. The Florida document number of this limited liability company is: M03000002471

3. Jurisdiction of its organization: Delaware

4. Date authorized to do business in Florida: 07/23/2003

SECTION II (5-9 complete only the applicable changes)

5. New name of the limited liability company: Lexington Investment Consulting, LLC
(must contain "Limited Liability Company," "L.L.C.," or "LLC.")

Lex-Life Investment Consulting, LLC

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must contain "Limited Liability Company," "L.L.C." or "LLC.")

6. If amending the registered agent and/or registered officer 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

7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

8. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(c), indicate that change:

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Remove

9. Attached is a certificate, if required: no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.


Signature of the authorized representative

Dale E. Veitch

Typed or printed name of signee

Filing Fee: \$25.00

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF AMENDMENT OF "LEXINGTON INVESTMENT COUNSEL, LLC", CHANGING ITS NAME FROM "LEXINGTON INVESTMENT COUNSEL, LLC" TO "LEXINGTON FINANCIAL LIFE MANAGEMENT, LLC", FILED IN THIS OFFICE ON THE FIFTEENTH DAY OF JULY, A.D. 2015, AT 11:30 O'CLOCK A.M.

3670932 8100

151055998

You may verify this certificate online
at corp.delaware.gov/authver.shtml




Jeffrey W. Bullock, Secretary of State
AUTHENTICATION: 2567765

DATE: 07-17-15

State of Delaware
Secretary of State
Division of Corporations
Delivered 11:30 AM 07/15/2015
FILED 11:30 AM 07/15/2015
SRV 151055998 - 3670932 FILE

**STATE OF DELAWARE
CERTIFICATE OF AMENDMENT**

1. Name of Limited Liability Company: Lexington Investment Counsel, LLC
2. The Certificate of Formation of the limited liability company is hereby amended as follows:

Change the name to
Lexington Financial Life Management, LLC

IN WITNESS WHEREOF, the undersigned have executed this Certificate on
the 13th day of July, A.D. 2015.

By: 

Authorized Person(s)

Pure Acquisitions II, LLC

Name: Dale E. Veitch, Manager

Print or Type