

M11000005517  
Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.**

((H16000099984 3)))



H160000999843ABCD

**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 : C T CORPORATION SYSTEM  
Account Number : FCA000000023  
Phone : (850)205-8842  
Fax Number : (850)878-5368

**\*\*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  
WASHINGTON WEALTH MANAGEMENT, LLC

Certificate of Status	0
Certified Copy	0
Page Count	07
Estimated Charge	\$25.00

RECEIVED  
2016 APR 22 AM 11:21  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2016 APR 22 P 3:37  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

APR 25 2016  
J. BRUCE

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Washington Wealth Management, 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:

Daniel Yi

Name of Person

NFP Corp.

Firm/Company

340 Madison Avenue, 20th Floor

Address

New York, NY 10173

City/State and Zip Code

dhrankaj@nfp.com

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

For further information concerning this matter, please call:

Daniel Yi

Name of Person

at ( 212 ) 301-4000

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

CR2E055 (9/15)

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2016 APR 22 P 3:37

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**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: Washington Wealth Management, LLC

Enter new principal office address, if applicable: No Change

(Principal office address  
MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

No Change

(Mailing address  
MAY BE A POST OFFICE BOX)

2. The Florida document number of this limited liability company is: M11000005517

3. Jurisdiction of its organization: Delaware

4. Date authorized to do business in Florida: 11/02/2011

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

5. New name of the limited liability company: Kestra Private Wealth Services, LLC

(must contain "Limited Liability Company," "L.L.C.," or "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: No Change

New Registered Office Address: No Change

Enter Florida Street Address

City, Florida 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:

No Change

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

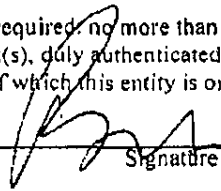
No Change

<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
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			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

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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  
Brett Schneider, Manager

\_\_\_\_\_  
Typed or printed name of signee

Filing Fee: \$25.00

# Delaware

The First State

Page 1

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 "WASHINGTON WEALTH  
MANAGEMENT, LLC", CHANGING ITS NAME FROM "WASHINGTON WEALTH  
MANAGEMENT, LLC" TO "KESTRA PRIVATE WEALTH SERVICES, LLC",  
FILED IN THIS OFFICE ON THE FIRST DAY OF MARCH, A.D. 2016, AT  
11:06 O'CLOCK A.M.

FILED  
2016 APR 22 P 3:37  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



4965758 8100  
SR# 20161377197

  
Jeffrey W. Bullock, Secretary of State

Authentication: 201909746  
Date: 03-01-16

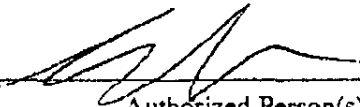
State of Delaware  
Secretary of State  
Division of Corporations  
Delivered 11:06 AM 03/01/2016  
FILED 11:06 AM 03/01/2016  
SR 20161377197 - File Number 4965758

## STATE OF DELAWARE CERTIFICATE OF AMENDMENT

1. Name of Limited Liability Company: Washington Wealth Management, LLC
2. The Certificate of Formation of the limited liability company is hereby amended as follows:

The name of the limited liability company is Kestra Private Wealth Services, LLC.

IN WITNESS WHEREOF, the undersigned have executed this Certificate on  
the 1st day of March, A.D. 2016.

By:   
Authorized Person(s)

Name: Evan A. Michael, Manager  
Print or Type

# Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF  
DELAWARE, DO HEREBY CERTIFY "KESTRA PRIVATE WEALTH SERVICES, LLC"  
IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN  
GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF  
THIS OFFICE SHOW, AS OF THE TWENTY-FIRST DAY OF APRIL, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN  
PAID TO DATE.



4965758 8300

SR# 20162468653

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

A handwritten signature in black ink, appearing to read "JBULLOCK", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed.

Jeffrey W. Bullock, Secretary of State

Authentication: 202190059

Date: 04-21-16