

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.

(((H23000176002 3)))



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 : HILL WARD HENDERSON

Account Number : 072100000520 Phone : (813)221-3900

Fax Number : (813)200-5995

Enter the email address for this business entity to be used for future anmual report mailings. Enter only one email address please.**

Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN PUCKETT FINANCIAL ADVISORS, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

T. LEMIEUX MAY 12 2023 (((H23000176002 3)))

47 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)

Name of limited liability Company as it appears of State: PUCKETT FINANCIAL ADVISORS, LLC	n the records of the Florida Department	of	
Enter new principal office address, if applicable:	···-		
(<u>Principal office address</u> <u>MUST BE A STREET ADDRESS</u>) —			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			
2. The Florida document number of this limited liabil	ity company is: 112000003296		
Jurisdiction of its organization: OKLAHOMA Date authorized to do business in Florida: 06/11/2	012		
SECTION II (5-9 complete only the applicable cha	nges)		
5. New name of the limited liability company: ALIC (must company description) (If name unavailable, enter alternate name adopted for copy of the written consent of the managers or management contain "Limited Liability Company," "L.L.C."	r the purpose of transacting business in	Florida and	attach a
mist contain "Limited Liability Company," "L.L.C."	or "LLC.")	<u>.</u>	;
6. If amending the registered agent and/or registered of registered agent and/or the new registered office addr	officer address on our records, enter the ess here:	name of the	
Name of New Registered Agent:		· · · · · ·	
New Registered Office Address:	Enter Florida Street Ad	dross	
	. Florid	_	
	City . Fioric	Zip Cod	le
New Registered Agent's Signature, if changing Regis I hereby accept the appointment as registered agent a the provisions of all statutes relative to the proper an and accept the obligations of my position as registere document is being filed to merely reflect a change in liability company has been notified in writing of this content is the company has been notified in writing of this content is the content in the content is the content in the content i	ind agree to act in this capacity. I furtho d complete performance of my duties, a d agent as provided for in Chapter 605, the registered office address, I hereby c	nd I am fami , F.S. Or, if t	liar with his

If Changing Registered Agent, Signature of New Registered Agent

(((H23000176002 3)))

If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change:						
le/ Capacity	Name	Address	Type of Action			
			□Add			
			□Remo			
			□Add			
			□Add			
			□Remo			
			□Add			
			□Remo			
			□Add			
aforementioned am	icate, if required: no more than 90 endment(s), duly authenticated by the law of which this entity is organ	the official having custody of records in th	⊡Remo			
	Brian Puckett	he authorized representative				

Filing Fee: \$25.00

(((H23000176002 3)))

OFFICE OF THE SECRETARY OF STATE



CERTIFICATE

I, THE UNDERSIGNED, Secretary of State of the State of Oklahoma, do hereby certify that I am, by the laws of said state, the custodian of the records of the state of Oklahoma relating to the right of corporations to transact business in this state and am the proper officer to execute this certificate.

I FURTHER CERTIFY that on the 16th day of January 2013, Articles of Amendment were filed by PUCKETT FINANCIAL ADVISORS, LLC, a Domestic Limited Liability Company, amending their name to: ALIGN WEALTH MANAGEMENT, LLC.

I FURTHER CERTIFY that ALIGN WEALTH MANAGEMENT, LLC, is a Domestic Limited Liability Company duly organized and existing under and by virtue of the laws of the state of Oklahoma and is in good standing according to the records of this office. This certificate is not to be construed as an endorsement, recommendation or notice of approval of the entity's financial condition or business activities and practices. Such information is not available from this office.



IN TESTIMONY WHEREOF, I hereunto set my hand and affixed the Great Seal of the State of Oklahoma, done at the City of Oklahoma City, this 9th day of May, 2023.

Pouin Pylinging
Secretary Of State