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SELVALVESSES FINBING

MAR 2 1 2014 T. BROWN

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Elliott Wealth Management Services, LLC Name of Limited Liability Company
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.
Please return all correspondence concerning this matter to the following:
Christopher J. Calandra Name of Person
Elliott Weath Management Services, LLC Firm/Company
176 Laning Street Address
Southington CT 06489 City/State and Zip Code
Calandra a elliottwealth. com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Christopher Calanda at (860) 516-0238 Name of Contact Person Area Code Daytime Telephone Number
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314 STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301
Enclosed is a check for the following amount: 2 \$125.00 Filing Fee \$ \$130.00 Filing Fee & \$ \$155.00 Filing Fee & \$ \$160.00 Filing Fee, Certificate of Status Certified Copy of Status & Certified Copy



March 13, 2014

CHRISTOPHER J CALANDRA ELLIOTT WEALTH MANAGEMENT SERVICES, LLC 176 LANING STREET SOUTHINGTON, CT 06489

SUBJECT: ELLIOTT WEALTH MANAGEMENT SERVICES, LLC

Ref. Number: W14000016424

We have received your document for ELLIOTT WEALTH MANAGEMENT SERVICES, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must insert the title or capacity of person(s) authorized to manage this limited liability company above the name(s) and address(es) listed. Such titles may include: Manager (MGR), Authorized Member (AMBR), AuthorizedPerson (AP), or Authorized Representative (AR).

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) 245-6051.

Letter Number: 714A00005552

Teresa Brown Regulatory Specialist II

www.sunbiz.org

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:
1. Elliott Wealth Management Services, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C," or "LLC.")
2. CT (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable)
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)
4. (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)
(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)
5. 16910 south US Highway 441 Snite 203
5. 16910 South US Highway 441 Suite 203 Summer field, FL 34491 (Street Address of Principal Office) 5:9ne
(Street Address of Principal Office)
6. <u>Signe</u> z zo
(Mailing Address)
7. The name, title or capacity and address of the person(s) who has/have authority to manage is/ate:
Summer field, FL 34491 (Street Address of Principal Office) (Mailing Address) 7. The name, title or capacity and address of the person(s) who has/have authority to marrage is/ate: (hristopher J. (alundra Member 84 Doryl Lune Sunthington, CT 06489
84 Doral Lune
Southington, CT 06489
8. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)
Signature of an authorized person (In accordance with section 605,0203, F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. am aware that any 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.)
Christopher Calandra
Typed or printed name of signee

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

Elliott Wealth Management Services, LC			
If unavailable, the alternate to be used in the state of Florida is:			
2. The name and the Florida street address of the registered agent and office are:			
16910 S. US, Auy 441, Bayles Aaza \$203 Florida Street Address (P.O. Box NOT ACCEPTABLE)			
Summer field, FL 34491 City/State/Zip			

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 as provided for in Chapter 605, Florida Statutes.

(Signature)

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

Office of the Secretary of the State of Connecticut

I, the Connecticut Secretary of the State, and keeper of the seal thereof, DO HEREBY CERTIFY, that articles of organization for

ELLIOTT WEALTH MANAGEMENT SERVICES, LLC

a domestic limited liability company, were filed in this office on February 19, 2010. The following is a list of all documents filed in this office:

Filing Type:	File Date/Time:	Effective Date/Time:
	\$\$\$\$\$\$\$\$\$\$\$\$\$\$	
ARTICLES OF ORGANIZATION	February 19, 2010 08:30 AM	
REPORT (2011)	February 02, 2012 10:36 AM	
REPORT (2012)	January 31, 2013 02:29 PM	
CERTIFICATE OF AMENDMENT	July 15, 2013 08:30 AM	
REPORT (2013)	March 05, 2014 03:26 PM	
REPORT (2014)	March 05, 2014 03:27 PM	

Articles of dissolution have not been filed, and so far as indicated by the records of this office such limited liability company is in existence.

Secretary of the State

: Whenk

Date Issued: March 05, 2014

Business ID: 0996898 Longform Certificate Number: 2014066477001

Note: To verify this certificate, visit the web site http://www.concord.sots.ct.gov