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COVER LETTER

то:	Registration Section Division of Corporation	os		,			
SUBJE	Weathervane V	Vealth Management	, LLC				
~0.55		Name of Limi	ted Liability Compan	у	 		
The end Existen	closed "Application by For ce, and check are submitte	eign Limited Liability Cord to register the above refe	mpany for Authoriza erenced foreign limi	ation to Tra ited liability	ansact Business in Florida," y company to transact busin	Certificate of ness in Florida	
Please r	eturn all correspondence c	oncerning this matter to the	e following:				
	Toffee Blum	, Paralegal	·				
		<u></u>	Name of Person				
	Fox Rothsch	ild LLP					
	Firm/Company						
	747 Constitution Drive, Ste. 100, P.O. Box 673						
			Address				
	Exton, PA 1	9341-0673					
	······································	City/	State and Zip Code				
	Thomas.paul	us@weathervanew	ealth.com				
		E-mail address: (to be use	ed for future annual re	eport notific	ation)		
For furt	her information concerning	this matter, please call:					
	Toffee Blum, Paral	egal	610 at (458-4			
	Name o	f Contact Person	Area Code	Day	ytime Telephone Number		
	MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314	Divisi Regist Cliftor 2661 I	ET ADDRESS: on of Corporations ration Section a Building Executive Center Ci assee, FL 32301	ircle	,		
Enclos	sed is a check for the for the for \$125.00 Filing Fee	ollowing amount: \$\square\$\square\$ \$130.00 \text{ Filing Fee & Certificate of Status}\$	□ \$155.00 Filin Certified Co		☐ \$160.00 Filing Fee, Ce of Status & Certified C		

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 LIARILITY COMPANY TO TRANSACT RUSINESS IN THE STATE OF FLORIDA-

(Name of Foreign Limited Liability Company; must i	nclude "Limited Liability Company," "L.L.C.," or "LLC")
	of transacting business in Florida. The alternate name must include "Limited
ability Company," "L.L.C," or "LLC.")	00.4050707
Pennsylvania (furisdiction under the law of which foreign limited liability	3. 20-1250737
company is organized)	(FEI number, if applicable)
upon filing	
	s in Florida, if prior to registration) 905, F.S. to determine penalty liability)
1055 Westlake Drive, 3rd Floor, Berwyn, P	A 19312
	>
(Street Add	lress of Principal Office)
1055 Westlake Drive, 3rd Floor, Berwyn, PA	A 19312
14)	lading Address)
. The name, title or capacity and address of the p	person(s) who has/have authority to manage is/are:
homas D. Paulus, Member - 1055 Westlake	es Drive 3rd Fl. Berwyn, PA 19312
Tiorilas B. Fadias, Morrison - 1005 Westland	133 Direct 31d Ci, Darwyii, 177 130 12
rederica C. Paulus, Member - 1055 Westlake	e Drive, 3rd Floor, Berwyn, PA 19312
And I discussed a market a contract	
	to more than 90 days old, duly authenticated by the of the algorithm to the law of which it is organized. (A photocopy is not
aving custody of records in the purisdiction under	e, a translation of the certificate under oath of the translator
sceptable. If the certificate is in a foreign language	
man the statement of	in the second se
	of an authorized person constitutes at perjury that the facts stated herein are true
	ment of State constitutes a third degree telony as provided for in \$.817,155, U.S.)

Typed or printed name of signee

COMMONWEALTH'OF PENNSYLVANIA DEPARTMENT OF STATE

JULY 21, 2014

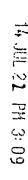
TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

Weathervane Wealth Management, LLC

is duly organized as a Pennsylvania Limited Liability Company under the laws of the Commonwealth of Pennsylvania and remains subsisting so far as the records of this office show, as of the date herein.

I DO FURTHER CERTIFY THAT, This Subsistence Certificate shall not imply that all fees, taxes, and penalties owed to the Commonwealth of Pennsylvania are paid.





IN TESTIMONY WHEREOF, I have hereunto set my hand and caused the Seal of the Secretary's Office to be affixed, the day and year above written.

Secretary of the Commonwealth

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.

f the Limited Liability Company is:	
wealth Management, ELG	
the alternate to be used in the state of Florida is:	,
nd the Florida street address of the registered agent and office are	:
Thomas D. Paulus	
(Name)	
6 Exuma Road	
Florida Street Address (P.O. Box NOT ACCEPTABLE)	
Key Largo 33037	
med as registered agent and to accept service of process for the al my at the place designated in this certificate, I hereby accept the ap at and agree to act in this capacity. I further agree to comply with t g to the proper and complete performance of my duties, and I am for gations of my position as registered agent as provided for in Chapt.	pointment as the provisions of alb uniliar with and
	Wealth Management, LLC the alternate to be used in the state of Florida is: Indicate the Florida street address of the registered agent and office are Thomas D. Paulus (Name) 6 Exuma Road Florida Street Address (P.O. Box NOT Acceptable) Key Largo 33037 FI. City/State/Zip Indicate designated in this certificate, I hereby accept the applicated agent and to the proper and complete performance of my duties, and I am feations of my position as registered agent as provided for in Chapter

\$ 100.00 Filing Fee for Application

- \$ 25,00Designation of Registered Agent
- \$ 30.00Certified Copy (optional)
- \$ 5.0Certificate of Status (optional)