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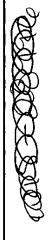
(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:  Sara Galdberg gave permission to add the managers title.  4.27.15 TJS					

Office Use Only



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T SCHROEDER

#### **COVER LETTER**

t,

Registration Section Division of Corporations

TO:

SUBJECT:	WALSER WEALTH MANAGEMENT COMPANY, a Limited Liability Compan								
20202011	Name of Limited Liability Company								
	I "Application by Foreign Limited Liabil ad check are submitted to register the about								
Please return	all correspondence concerning this matt	er to the following:							
	Sara Goldberg								
	Name of Person								
Walser Wealth Management Company									
	Firm/Company								
	777 S. Harbour Island Blvd.; Suite 350								
	Address								
	Tampa, FL 33602								
City/State and Zip Code									
	info@walserwealth.com								
	E-mail address: (1	o be used for future annual repo	ort notification)	•					
For further in	formation concerning this matter, please	call:							
S	ara Goldberg	<b>866</b>	929-3258						
	Name of Contact Person	Area Code	Daytime Telephone Number	•					
Div Reg P.O	ILING ADDRESS: ision of Corporations istration Section . Box 6327 ahassee, FL 32314	STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circl Tallahassee, FL 32301	le						
	s a check for the following amoun 125.00 Filing Fee \$130.00 Filing Certificate of S	Fee & 🔳 \$155.00 Filing							

### 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. WALSER WEALTH MANAGEMENT C (Name of Foreign Limited Liability Company; must in	COMPANY, a Limited Liability Company nclude "Limited Liability Company," "L.L.C.," or "LLC.")
Liability Company," "L.L.C," or "LLC.")	of transacting business in Florida. The alternate name must include "Limited
<sub>2.</sub> Delaware	<sub>3</sub> 47-3698670
(Jurisdiction under the law of which foreign limited liability company is organized)	(FEI number, if applicable)
4	
(Date first transacted business (See sections 605.0904 & 605.09	s in Florida, if prior to registration.) 905, F.S. to determine penalty liability)
16192 Coastal Highway	Contraction of the second of t
Lewes, DE 19958	47-manus
(Street Add	ress of Principal Office)
6. PO Box 46335	T T
Tampa, FL 33646	
(M:	ailing Address)
7. The name, title or capacity and address of the process Rebecca Walser, Esq. — Manager 777 S. Harbour Island Blvd.; Suite 350	
Tampa, FL 33602	
having custody of records in the jurisdiction under acceptable. If the certificate is in a foreign language must be submitted)  Signature of the accordance with section 605.0203, F.S., the execution of this document of the company of the section of this document of the company of the section of this document of the company of the section of this document of the company of the section of this document of the company of the	o more than 90 days old, duly authenticated by the official the law of which it is organized. (A photocopy is not e, a translation of the certificate under oath of the translator fan authorized person constitutes an affirmation under the penalties of perjury that the facts stated herein are trunent of State constitutes a third degree felony as provided for in s.817.155, F.S.)
Rebecca V	Walser, Esq.
Typed or prin	ited 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.

WALSER WEALTH MANAGEMENT COMPANY, a Limited Liability Comp							
If unavailable,	the alternate to be	e used in the	state of Florida is:				
2. The name a	nd the Florida stro	eet address o	f the registered agent a	nd office are:			
	Rebecca Walser, Esq.						
	(Name)						
	777 S. Harbour Island Blvd.; Suite 350						
	Florida Street Address (P.O. Box NOT ACCEPTABLE)						
	Tampa		<sub>FL</sub> 33602				
			City/State/Zip		_		
liability compar registered agen statutes relating	ny at the place des t and agree to act g to the proper an	signated in th in this capa d complete p	o accept service of processis certificate, I hereby acity. I further agree to erformance of my dutientered agent as provided ture)  Filing Fee for Application of Registration	accept the appoin comply with the ps, and I am familifor in Chapter 60	itment as provisions of all iar with and		
		\$ 30.00	Certified Copy (opti	· · · ·	ب پ		

5.00

Certificate of Status (optional)

# Delaware

PAGE 1

#### The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "WALSER WEALTH MANAGEMENT COMPANY, A

LIMITED LIABILITY COMPANY" 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

SECOND DAY OF APRIL, A.D. 2015.

5683466 8300

150438500

AUTHENTICATION: 2260625

DATE: 04-02-15

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