

M20000008586

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

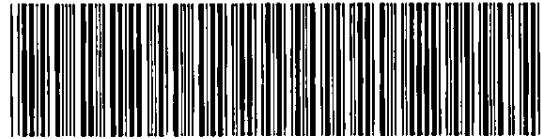
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer.

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500354188915

RECEIVED
2020 OCT 23 PM 2:19
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FILED
2020 OCT 23 AM 9:18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Y. SHOLKER
OCT 20 2020

FLORIDA FILING & SEARCH SERVICES, INC.

**P.O. BOX 10662 TALLAHASSEE, FL 32302
155 Office Plaza Dr Ste A Tallahassee FL 32301
PHONE: (800) 435-9371; FAX: (866) 860-8395**

DATE: 10/23/20

NAME: TARIT ADVISORS, LLC

TYPE OF FILING: AMENDMENT

COST: 60.00

RETURN: CERTIFIED COPY AND GOOD STANDING PLEASE

ACCOUNT: FCA000000015

AUTHORIZATION: ABBIE/PAUL HODGE

Attbodge

(File Second *)*

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Tarit Advisors, 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:

Jennifer Earney

Name of Person

Agile Legal

Firm/Company

651 N. Broad street, Suite 308

Address

Middletown, DE 19709

City/State and Zip Code

corporate@agilelegal.com

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

For further information concerning this matter, please call:

Jennifer Earney

at (302) 376-6710

Name of Person

Area Code & Daytime Telephone Number

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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

October 19, 2020

Florida Department of State
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, Florida 32303

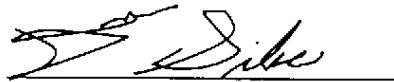
RE: Notice of Consent re Immediate Release of Entity Name, "Instrumental Wealth, LLC"

Dear Sir/Madam,

The Florida limited liability company, Instrumental Wealth, LLC (EIN: 84-4595560) (as used herein "we" or "our"), has filed Articles of Dissolution with the Division of Corporations. In connection therewith, please accept this letter as our notice of consent to the immediate name release of "Instrumental Wealth, LLC" to the Delaware limited liability company, Instrumental Wealth, LLC f/k/a Tarit Advisors, LLC (EIN: 85-3081152).

We will not revoke or rescind the previously filed Articles of Dissolution.

Best regards,

A handwritten signature in black ink, appearing to read "David Silver", is written over a horizontal line.

David Silver
Principal

**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: Tarit Advisors, LLC

Enter new principal office address, if applicable: _____

(Principal office address
MUST BE A STREET ADDRESS)

4890 West Kennedy Blvd., Suite 430

Tampa FL 33609

Enter new mailing address, if applicable: _____

(Mailing address
MAY BE A POST OFFICE BOX)

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

3. Jurisdiction of its organization: Delaware

4. Date authorized to do business in Florida: September 18, 2020

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

5. New name of the limited liability company: Instrumental Wealth, 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: _____

New Registered Office Address: _____

Enter Florida Street Address

_____, Florida _____
City 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:

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

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
Manager	Pamela Stross	5300 W CYPRESS STREET	<input type="checkbox"/> Add
		TAMPA, FLORIDA 33607	<input checked="" type="checkbox"/> Remove
SOLE MI	DAVID SILVER	4890 West Kennedy Boulevard, Suite 430	<input checked="" type="checkbox"/> Add
		TAMPA, FLORIDA 33609	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

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.

DocuSigned by:

David Silver

7250969705704118

Signature of the authorized representative

DAVID SILVER

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 THAT THE SAID 'TARIT ADVISORS, LLC', FILED A CERTIFICATE OF AMENDMENT, CHANGING ITS NAME TO 'INSTRUMENTAL WEALTH, LLC' ON THE EIGHTH DAY OF OCTOBER, A.D. 2020, AT 10:52 O'CLOCK A.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID LIMITED LIABILITY COMPANY IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE NOT HAVING BEEN CANCELLED OR REVOKED SO FAR AS THE RECORDS OF THIS OFFICE SHOW AND IS DULY AUTHORIZED TO TRANSACT BUSINESS.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "INSTRUMENTAL WEALTH, LLC" WAS FORMED ON THE TWENTY-SIXTH DAY OF AUGUST, A.D. 2020.



3534658 8320
SR# 20207798294

You may verify this certificate online at 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 in a small font.

Authentication: 203851484
Date: 10-13-20