

M21 000000 8970

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

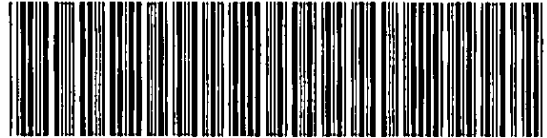
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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MAR 16 2022

Office Use Only



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03/07/22--01010--024 **25.00

FILED
2022 MAR -7 PM 3:12
SECRETARY OF STATE
TALLAHASSEE, FL

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: McClain Lovejoy Financial Planning, 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:

Phillip Walker

Name of Person

Approach Retirement Advisors, LLC

Firm/Company

3 W Garden St, Suite 710

Address

Pensacola

City/State and Zip Code

phil@approachretirement.com

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

For further information concerning this matter, please call:

Phillip B Walker

at (850) 316-8873

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

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE
AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT
BUSINESS IN FLORIDA**

2022 MAR -7 PM 3:12

SECTION I (1-4 must be completed)

SECRETARY OF STATE
TALLAHASSEE, FL.

1. Name of limited liability Company as it appears on the records of the Florida Department of State: MCCLAIN LOVEJOY FINANCIAL PLANNING, LLC

Enter new principal office address, if applicable: _____

(Principal office address
MUST BE A STREET ADDRESS)

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: M21000008970

3. Jurisdiction of its organization: ALABAMA

4. Date authorized to do business in Florida: 07/14/2021

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

5. New name of the limited liability company: Approach Retirement Advisors, 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.

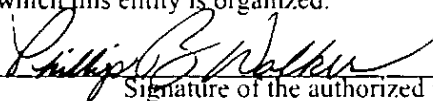
If Changing Registered Agent, Signature of New Registered Agent

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>
_____	_____	_____	<input type="checkbox"/> Add
		_____	<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
_____	_____	_____	<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.



Signature of the authorized representative

Phillip B. Walker

Typed or printed name of signee

Filing Fee: \$25.00

John H. Merrill
Secretary of State

P.O. Box 5616
Montgomery, AL 36103-5616

STATE OF ALABAMA

**I, John H. Merrill, Secretary of State of Alabama, having custody of the
Great and Principal Seal of said State, do hereby certify that**

the entity records on file in this office disclose that Approach Retirement Advisors,
LLC was formed in Jefferson County, Alabama on November 9, 2012. The
Alabama Entity Identification number for this entity is 000-269896. I further
certify that the records do not disclose that said entity has been dissolved,
cancelled or terminated.



20220304000017682

**In Testimony Whereof, I have hereunto set my
hand and affixed the Great Seal of the State, at the
Capitol, in the city of Montgomery, on this day.**

03/04/2022

Date

A handwritten signature in cursive script, appearing to read 'J. H. Merrill'.

John H. Merrill

Secretary of State

John H. Merrill
Secretary of State

P. O. Box 5616
Montgomery, AL 36103-5616

STATE OF ALABAMA

**I, John H. Merrill, Secretary of State of Alabama, having custody of the
Great and Principal Seal of said State, do hereby certify that**

as appears on file and of record in this office, the pages hereto attached, contain a
true, accurate, and literal copy of the Articles of Amendment filed on behalf of
Approach Retirement Advisors, LLC, as received and filed in the Office of the
Secretary of State on 08/02/2021.



20220304000012290

In Testimony Whereof, I have hereunto set my
hand and affixed the Great Seal of the State, at the
Capitol, in the city of Montgomery, on this day.

03/04/2022

Date

A handwritten signature in black ink, reading 'J. H. Merrill', is written over a horizontal line.

John H. Merrill

Secretary of State

STATE OF ALABAMA

DOMESTIC LIMITED LIABILITY COMPANY
CERTIFICATE OF AMENDMENT

PURPOSE: In order to amend a Limited Liability Company's (LLC) Certificate of Formation under Section 10A-5A-2.02 of the Code of Alabama 1975 this Amendment and the appropriate filing fees must be filed with the Secretary of State's office.

INSTRUCTIONS: Mail one (1) signed original and one (1) copy of this completed form along with a self-addressed, stamped envelope with the filing fee of \$100.00 (credit card, check, or money order) to the Secretary of State, Business Services, P.O. Box 5616, Montgomery, Alabama 36103-5616. If the credit card does not authorize or if the check is dishonored, the filing will be removed from the index and of no legal effect. In the case of a dishonored check, a \$30 fee will be charged.

This form must be typed.

1. The name of the Limited Liability Company from the Certificate of Formation:

McClain Lovejoy Financial Planning, LLC

2. The date the Certificate of Formation was filed: 11 / 09 / 2012 (MM/DD/YYYY)

3. Alabama Entity ID Number (Format: 000-000): 269 - 896 **TO OBTAIN ID NUMBER** Go to our website at www.sos.alabama.gov click on Business Services (below picture), click on Business Entity and Name Search, click on Entity Name, enter the name of the entity in the appropriate box, and enter. Click on the number and verify that this is the correct entity. This step is strongly recommended.

4. The titles, dates, and places of filing of any previous Amendments: n/a

Attach a listing if necessary.

[Instruction on Amendment completion: Be very specific about what must be changed if you are amending existing information. If the amendment includes a name change, a copy of the Name Reservation form issued by the Office of Secretary of State must be attached.]

Registered agents and registered agent addresses are changed by filing a Change Of Registered Agent Or Registered Office By Entity form directly with the Office of the Secretary of State (the new agent's signature is required agreeing to accept responsibility). You may file the information as an Amendment also, but the change form must be on file with the Secretary of State per 10A-1-3.12(a)(2) to effect the change in the public records database.]

(For SOS Use Only)

This form was prepared by: (type name and full address)

Laura M. Jackman,
Wallace, Jordan, Ratliff & Brandt, L.L.C.
800 Shades Creek Parkway, Suite 400
Birmingham, Alabama 35209

RECEIVED DATE

AUG 02 2021

SECRETARY OF STATE
OF ALABAMA

Alabama
Sec. Of State

Entity Change
269-896 DLL
Date 8/02/2021
Time 17:00
210803 3 Pg

File \$100.00
County \$.00

Total \$100.00
01/007

DOMESTIC LIMITED LIABILITY COMPANY AMENDMENT

5. The following amendment was adopted on 7 / 14 / 2021 (MM/DD/YYYY):

Section 1. of the Certificate of Formation shall be deleted in its entirety and replaced with the following Section 1.:

1. The name of the limited liability company is: Approach Retirement Advisors, LLC.

☐ Additional Amendments and the dates on which they were adopted are attached.

6. The undersigned authorized signature certifies that the amendment or amendments have been approved in the manner required by Title 10A of the *Code of Alabama of 1975* and the governing documents of this entity.

7 / 14 / 2021
Date (MM/DD/YYYY)

ES McIn
Signature as required by 10A-5A-2.04

Eric J. McClain
Typed Name of Above Signature

Authorized Member
Typed Title/Capacity to Sign under 10A-5A-2.04

John H. Merrill
Secretary of State

P.O. Box 5616
Montgomery, AL 36103-5616

STATE OF ALABAMA

I, John H. Merrill, Secretary of State of Alabama, having custody of the Great and Principal Seal of said State, do hereby certify that

pursuant to the provisions of Title 10A, Chapter 1, Article 5, Code of Alabama 1975, and upon an examination of the entity records on file in this office, the following entity name is reserved as available:

Approach Retirement Advisors, LLC

This name reservation is for the exclusive use of Wallace, Jordan, Ratliff & Brandt, L.L.C., Post Office Box 530910, Birmingham, AL 35253 for a period of one year beginning May 26, 2021 and expiring May 26, 2022



RES954428

In Testimony Whereof, I have hereunto set my hand and affixed the Great Seal of the State, at the Capitol, in the city of Montgomery, on this day.

May 26, 2021

Date

J. H. Merrill

John H. Merrill

Secretary of State

Alabama
Sec. Of State
Entity Change
269-896 DLL
Date 8/02/2021
Time 17:00
210803 3 Pg
File \$100.00
County \$5.00
Total \$105.00
017007