# Poad67

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SECKETARY OF SATIONS
DIVISION OF CORPORATIONS

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**D** CUSHING

#### **COVER LETTER**

TO: Amendment Section Division of Corporations	
Wisconsin Discount Securities, Inc.	
SUBJECT:Name of Corporation	
DOCUMENT NUMBER: PO2267	
The enclosed Amendment and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Cathy Webb	
Name of Contact Person	
American Global Wealth Managment	
Firm/Company	
1600 Pennsylvania Avenue	e Pie
Address	17 K
McDonough, Georgia 30253	ISIGHT TARY
City/State and Zip Code	
cathy@capesecurities.com	PH 4: 35
E-mail address: (to be used for future annual report notification)	PORATIONS PM 4: 35
For further information concerning this matter, please call:	SHO SHO
Cathy Webb 678 583-1120 at ( )	
Name of Contact Person Area Code & Daytime Telephone Number	
Enclosed is a check for the following amount:	
\$35.00 Filing Fee  x \$43.75 Filing Fee & Certificate of Status	
Mailing Address:  Amendment Section  Amendment Section	

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

Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## PROFIT CORPORATION APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO APPLICATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

(Pursuant to s. 607.1504, F.S.)

SECTION I (1-3 must be completed)			J. SIANG
(Document number of corporation (if known)		# Q	
		per of corporation (if known)	MAR 21 PH
1. Wisconsin Discount Securiti	es, Inc.		PH OF S
	Name of corporation as it appea	rs on the records of the Department of State)	L: 35
2. Wisconsin		3 April 1995	5 048
	rated under laws of)	3. April 1995 (Date authorized to do business in	Florida)
,	SI (4-7 complete onl	ECTION II y the applicable changes)	
		tion, when was the change effected under the	e laws of
its jurisdiction of incorp	poration? Watch 20, 2017	<del></del>	
5. American Global Wealth Ma			
(Name of corporation af appropriate abbreviation	ter the amendment, adding on, if not contained in new i	suffix "corporation," "company," or "incorname of the corporation)	porated," or
(If new name is unavaila business in Florida)	ble in Florida, enter alterna	te corporate name adopted for the purpose o	f transacting
6. If the amendment chang	es the period of duration, ir	ndicate new period of duration.	
	N/A		
	(N	lew duration)	
7. If the amendment chang	es the jurisdiction of incorp	poration, indicate new jurisdiction.	
	N/A		
	,	w jurisdiction)	
8. Attached is a certificate 90 days prior to delivery having custody of corporations.	or document of similar imp of the application to the D rate records in the jurisdicti	oort, evidencing the amendment, authenticate epartment of State, by the Secretary of State ion under the laws of which it is incorporate	ed not more than or other official d.
14	IF All		
<del></del>	(Signature of a director, pro of a receiver or other cour	esident or other officer - if in the hands t appointed fiduciary, by that fiduciary)	<del></del>
John Kevin Jokela		President	
(Typed or printed	name of person signing)	(Title of person signing)	_

#### United States of America State of Wisconsin

#### DEPARTMENT OF FINANCIAL INSTITUTIONS



Division of Corporate & Consumer Services

To All to Whom These Presents Shall Come, Greeting:

I, Mary Ann McCoshen, Administrator of the Division of Corporate and Consumer Services, Department of Financial Institutions, do hereby certify that

#### AMERICAN GLOBAL WEALTH MANAGEMENT, INC.

is a domestic corporation or a domestic limited liability company organized under the laws of this state and that its date of incorporation or organization is February 22, 1977.

I further certify that said corporation or limited liability company has, within its most recently completed report year, filed an annual report required under ss. 180.1622, 180.1921, 181.1622 or 183.0120 Wis. Stats., and that it has not filed articles of dissolution.



IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the official seal of the Department on March 20, 2017.

MARY ANN MCCOSHEN, Administrator Division of Corporate and Consumer Services Department of Financial Institutions

DFI/Corp/33

To validate the authenticity of this certificate

Visit this web address: http://www.wdfi.org/apps/ccs/verify/

Enter this code: 197007-7DF44153

FILING FEE \$40.00

OPTIONAL EXPEDITED + \$25.00

DO NOT STAPLE

Sec. 180.1006 Wis, Stats.

### State of Wisconsin DEPARTMENT OF FINANCIAL INSTITUTIONS Division of Corporate & Consumer Services



#### ARTICLES OF AMENDMENT - STOCK, FOR-PROFIT CORPORATION

A. The present corporate name (prior to any change effected by this amendment) is:

Wisconsin Discount Securities Corporation

(Enter Corporate Name)

Text of Amendment (Refer to the existing articles of incorporation and the instructions on the reverse of this form. Determine those items to be changed and set forth the number identifying the paragraph in the articles of incorporation being changed and how the amended paragraph is to read.)

RESOLVED, THAT the articles of incorporation be amended as follows:

The articles of incorporation of the corporation be and are amended by changing the name of the corporation to

American Global Wealth Managament, Inc.

The Amended articles shall read: Paragraph 1

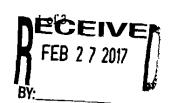
The name of the coporation shall be American Global Wealth Management, Inc.

STATE OF WISCONSIN FILED

FEB 2 1 2017

DEPARTMENT OF FINANCIAL INSITUTIONS

DFI/CORP/4(R03/15) Use of this form is voluntary.



B. Amendment(s) adopted onNovember 150	th 2016					
(Indicate the method of adoption by checking (X) the appropriate choice below.)						
In accordance with sec. 180,1002, Wis	s. Stats. (By the Board of Directors	)				
X In accordance with sec. 180,1003, Wis. Stats. (By the Board of Directors and Shareholders) OR						
In accordance with sec. 180,1005, Wisissuance of shares)  C. Executed on 2/10/17 (Date)	. Stats. (By Incorporators or Board  (Signature)	FILED FEB <b>2 1</b> 2017				
Title: President Secretary or other officer title	J. KEVIN JOKELA (Printed name)	DEPARTMENT OF FINANCIAL INSITUTIONS				
This document was drafted by Judy Newcomb (not executed in Wisconsin)  (Name the individual who drafted the document)						

INSTRUCTIONS (Ref. sec. 180.1006 Wis. Stats. for document content)

Please use BLACK ink. Submit one original to State of WI-Dept. of Financial Institutions, Box 93348, Milwaukee WI, 53293-0348, together with a FILING FEE of \$40.00 payable to the department. Filing fee is non-refundable. (If sent by Express or Priority U.S. mail, address to 201 W. Washington Ave., Suite 300, Madison WI, 53703). The original must include an original manual signature, per sec. 180.0120(3)(c), Wis. Stats. NOTICE: This form may be used to accomplish a filing required or permitted by statute to be made with the department. Information requested may be used for secondary purposes. If you have any questions, please contact the Division of Corporate & Consumer Services at 608-261-7577. Hearing-impaired may call 771 for TTY.

DFI/CORP/4(R03/15)