

PI4 0000 17512

Pure Path Wealth Management  
2719 Letap Ct  
Suite 101  
Land O Lake, FL 34638

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

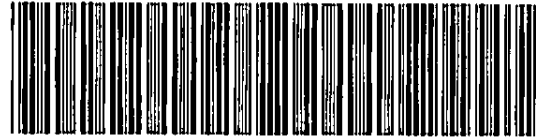
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FL

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FLORIDA DEPARTMENT OF STATE  
Division of Corporations

*See Changes  
to  
Line 5*

October 6, 2021

PURE PATH WEALTH MANAGEMENT  
2719 LETAP CT  
SUITE 101  
LAND O LAKE, FL 34638

SUBJECT: PURE PATH WEALTH MANAGEMENT CORP.  
Ref. Number: P14000017512

We have received your document for PURE PATH WEALTH MANAGEMENT CORP. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please list the current registered agent name and address that is reflected on sunbiz.org on line 5.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Catherine M Brumbley  
Regulatory Specialist II

Letter Number: 621A00024219

## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: PurePath Wealth Management  
Name of Corporation

DOCUMENT NUMBER: P14000017512

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

AMY BARNDOLLAR  
Name of Contact Person  
PURE PATH WEALTH MANAGEMENT  
Firm/Company  
2719 Letap Ct.  
Address  
LUNA O LAKE, FL 34638  
City/State and Zip Code  
amybdollar@hotmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Amy Barndollar at ( 813 ) 4955803  
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

**Mailing Address:**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Amendment Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of FL in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: PurePath Wealth Management.
2. The principal office address: 2719 Letap Ct. Ste 101  
Land O Lakes, FL 34638
3. The mailing address (if different): SAME
4. Date of incorporation/qualification: 2-24-2014 Document number: P14000017512
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

RESIGNED Matthew Mangini  
2719 Letap Ct. Ste 101  
Land O Lakes, FL 34638


6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

AMY BARNARDUK  
2719 Letap Ct.  
Land O Lakes, FL 34638

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2021 OCT 18 AM 11:46  
TALLAHASSEE  
DIVISION OF CORPORATIONS

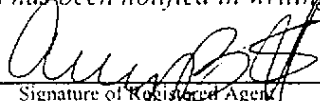
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

  
Signature of an officer or director

AMY BARNARDUK, President.  
Printed or typed name and title

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 obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

  
Signature of Registered Agent

9/28/2021  
Date

If signing on behalf of an entity:

Amy Barnarduk  
Typed or Printed Name

\*\*\* FILING FEE: \$35.00 \*\*\*

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE  
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314