# L11000144189

(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phon	e #)
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2013 JUN 25 AN 9: 50
SECRETARY OF STATE
SECRETARY OF FLORIDA

#### **COVER LETTER**

TO:

Registration Section
Division of Corporations

# RIVERDALE FINANCIAL USA LLC

SUBJECT:

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

# LEONARDO FRANYIE

Name of Person

# FRANYIE CONSULTING GROUP IN C

Firm/Company

# 6625 MIAMI LAKES DRIVE SUITE 220

Address

MIAMI LAKES, FL 33014

City/State and Zip Code

### LAFRANYIE@GMAIL.COM

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

For further information concerning this matter, please call:

# LEONARDO FRANYIE

**\_786**985-1492

Name of Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

□ \$25.00 Filing Fee

□\$30.00 Filing Fee & Certificate of Status

□\$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

□\$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

**MAILING ADDRESS:** 

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

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



June 14, 2013

LEONARDO FRANYIE 6625 MIAMI LAKES DRIVE SUITE 236 MIAMI LAKES, FL 33014

SUBJECT: RIVERDALE FINANCIAL USA LLC

Ref. Number: L11000144189

We have received your document for RIVERDALE FINANCIAL USA LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6051.

Letter Number: 613A00014992

Neysa Culligan Regulatory Specialist II

www.sunbiz.org

#### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED
2013 JUN 25 AN 9:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RΙΝ	/ERD	AI F	FIN	IANO	141	LISA	LLC.
1711	VI (NI)	$\sim$ L	1 1113			USA	LLG

(Name of the Limited Liability Company as it now appears on our records.)

(A)	ionga Limicu L	hability Company)		
The Articles of Organization for this Limited Lia Florida document number L11000144189	bility Company	were filed on 12	/27/2011	and assigned
This amendment is submitted to amend the follo	wing:			
A. If amending name, enter the new name of	the limited liab	ility company he	<u>re</u> :	
The new name must be distinguishable and end with "L.L.C."	the words "Limi	ited Liability Compa	any," the designation "LL	.C" or the abbreviation
Enter new principal offices address, if applica	hle:	6625 MIAM	I LAKES DRIVE	
(Principal office address MUST BE A STREET ADDRESS)  Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		SUITE 220		
		MIAMI LAKES, FL 33014		
		SUITE 220	LAKES DRIVE	
B. If amending the registered agent and/o registered agent and/or the new registered off  Name of New Registered Agent:	LEONARD	e: OO FRANYIE		e name of the new
New Registered Office Address:	6625 MIAN	MI LAKES DRIVE SUITE 220  Enter Florida street address		
	MIAMI LA			
	IAUVIAII FVI	City	, Florida <u>33(</u>	Zip Code
New Registered Agent's Signature, if changing R	egistered 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 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address. I hereby confirm that the firsted liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, <u>enter the title</u>, <u>name</u>, <u>and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager

MGRM =	Managing Member	•	
<u>Title</u>	Name	<u>Address</u>	Type of Action
		-	Add
			Remove
			Remove
			Add
			Remove
			Add
			Remove
			Remove
			Add
			Remove

amenumg any other mi	formation, enter change(s) here: (Attach additional sheets, if necessary.)
<del></del>	
6-20-13	
	,
	Signature of a member of thorized representative of a member
	Hubo BETMANA. Typed or printed name of signee
	Page 3 of 3

Filing Fee: \$25.00