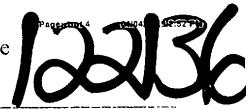
Fax: (850) 617-6383

lepartment of State Corporations



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H190001120543)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : M. BURR KEIM COMPANY

Account Number : I19990000242 Phone : (215)563-8113

Fax Number

: (215)977-9386

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address:

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN **AUCTION V COMMERCE, LLC**

Certificate of Status	. 0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

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Help

12.

(((H190001120543)))

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	ON V COMMERCE, LLC	
(Name of the Limited Liah (A Flori	ility Company as it now appears on out records.) ida Limited Liability Company)	<del></del>
The Articles of Organization for this Limited Liability Florida document number £15000122136		and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lin	mited liability company here:	
The new name must be distinguishable and contain the words "Li	imited Liability Company," the designation "LLC" or	the abbreviation "L.I. C"
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADI	ORESS)	
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)		SECRETARY A
B. If amending the registered agent and/or regregistered agent and/or the new registered office ad	gistered office address on our records, <u>en</u> <u>ldress here</u> :	nter the name of the new
Name of New Registered Agent:	<del></del>	
New Registered Office Address:	Enter Florida street address	
	, Florid	a
_	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

## (((H190001120543)))

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

Fax: 12159779386

From: M. BURR KEIM CO

<u> Title</u>	Name	Address	Type of Action
MGR	R. Gregory Levi	4700 Groveport Road Obetz, OH 43207	■ Add
			Remove
			Change
			□ Remove
		<del></del>	Change
			☐ Remove
			APP AHASSEE
			Change
			□ Add
			☐ Change
			□ Add
			□ Remove
			Change

Page: 4 of 4

(((11190001129543)))

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary)

To:

Effective date, if other than the date of filing:	(optional)
(If an effective date is listed, the date must be specific and cannot be prior to date of filing	ng or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)
Note: If the date inserted in this block does not meet the applicable statutor	y filing requirements, this date will not be listed as the
document's effective date on the Department of State's records.	

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated	April 2	2019	
<i>-</i>			
		SULLE	
		Signature of a member or authorized representative of a member	
		James Sibel, Manager	
	<del></del>	Typed or printed name of signee	

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Filing Fee: \$25.00 (((H190001129543)))