L16000210476

(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:

Office Use Only

300394516763

FILED
2022 SEP 21 AM 10:35
SECRETARY OF STATE
TALLAHASSEE, FL

2022 SEP 21 AM 10:22

CT CORP

3458 Lakeshore Drive, Tallahassee, FL 32312
850-656-4724

Date: 09/21/2022

Acc#I20160000072

Name:	Ria Advisory LLC
Document #:	
Order #:	14550504

Certified Copy of Arts & Amend:	☐			
Plain Copy:	☐			
Certificate of Good Standing:	☐			
Certified Copy of	☐			
Apostille/Notarial Certification:	☐		Country of Destination:	
			Number of Certs:	

Filing: ☑ Certified: ☐
Plain: ☑
COGS: ☐

Availability _____
Document ___
Examiner _____
Updater _____
Verifier _____
W.P. Verifier _____
Ref# _____

Amount: $ 25.00

Thank you!

COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: RIA ADVISORY LLC
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:

Saket Pabby
Name of Person

RIA Advisory LLC
Firm/Company

2000 Ponce de Leon Blvd. Suite 600
Address

Coral Gables, FL 33134
City/State and Zip Code

saket.pabby@riaadvisory.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Saket Pabby at (305) 496-7405
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 Address:
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

FILED

2022 SEP 21 AM 10:36

SECRETARY OF STATE
TALLAHASSEE, FL

RIA ADVISORY LLC

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

The Articles of Organization for this Limited Liability Company were filed on November 16, 2016 and assigned Florida document number L16000210476.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices 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)

B. If amending the registered agent and/or registered office 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: C T Corporation System

New Registered Office Address: 1200 S. Pine Island Road
Enter Florida street address

Plantation, **Florida** 33324
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

Madonna Cuddihy, Assistant Secretary

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

Title	Name	Address	Type of Action
P and T	Saket Pabby	2000 Ponce de Leon Blvd, Suite 600	☐ Add
		Coral Gables, FL 33134	☐ Remove
			■ Change
V	Supriya Mukhapadhyay	2928 Willow Ridge Drive	☐ Add
		Naperville, IL 60564	☐ Remove
			■ Change
V	Emin Eker	2263 SW 37th Ave., Apt 506	☐ Add
		Miami, FL 33145	☐ Remove
			■ Change
V	Sameer Khetarpal	14 McLellan Court	☐ Add
		New Brunswick, NJ 08816	☐ Remove
			■ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change

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

Please also remove the titles of Managing Partner from each of Supriya Mukhapadhyay, Emin Eker, and Sameer Khetarpal.

FILED
2022 SEP 21 AM 10:36
SECRETARY OF STATE
TALLAHASSEE, FL

E. 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 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 statutory 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 9/20/2022

Saket Pabby

Signature of a member or authorized representative of a member

Saket Pabby

Typed or printed name of signee

Filing Fee: $25.00