

**L16000151129**

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(Requestor's Name)

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(City/State/Zip/Phone #)

☐ PICK-UP

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\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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16 SEP -7 PM 2:17  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

SEP 15 2016  
J. HARRIS

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: r dale solutions 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:

robyn goldberg  
Name of Person

r dale solutions LLC  
Firm/Company

130 NW 117<sup>th</sup> Terrace  
Address

Plantation FL  
City/State and Zip Code

robbyngoldberg1@mac.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

robyn goldberg at (954) 326 1454  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- ☒ \$25.00 Filing Fee  
*i sent in my \$25.00*
- ☐ \$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

TALLAHASSEE, FL 32301

2016 SEP -7 PM 5:05

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FLORIDA DEPARTMENT OF STATE  
Division of Corporations

August 26, 2016

ROBYN GOLDBERG  
130 NW 117TH TERRACE  
PLANTATION, FL 33325

SUBJECT: R DALE SOLUTIONS LLC  
Ref. Number: L16000151129

FILED  
16 SEP -7 PM 2:17  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

We have received your document for R DALE SOLUTIONS LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a FOREIGN LLC, but your entity is a FLORIDA LLC. Please complete and return the enclosed blank form(s).

You must insert the title or capacity of person(s) authorized to manage this limited liability company above the name(s) and address(es) listed. Such titles may include: Manager (MGR), Authorized Member (AMBR), Authorized Person (AP), or Authorized Representative (AR).

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.

Jenna D Harris  
Regulatory Specialist II

Letter Number: 716A00018248

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

rdale solutions 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 8/12/16 and assigned  
Florida document number L 16000151129

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)

130 NW 117<sup>th</sup> terrace  
plantation FL 33325

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:

New Registered Office Address:

Not amending - but  
robyn goldberg  
130 NW 117<sup>th</sup> terrace  
Enter Florida street address  
plantation, Florida 33325  
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

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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
--------------	-------------	----------------	-----------------------

AMBR	robyn goldberg	130 NW 117 <sup>th</sup> terr	<input checked="" type="checkbox"/> Add
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☐ Remove

☐ Change

MGR	robyn goldberg	130 NW 117 <sup>th</sup> terr	<input checked="" type="checkbox"/> Add
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**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.

Dated 1/2/16, \_\_\_\_\_

Signature of a member or authorized representative of a member

Typed or printed name of signee

15 SEP - 7 PM 2:17  
SERIALS STATE  
TALLAHASSEE FL 32301