# 119000/189943

Office Use Only



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2019 J. L. 25 J. Fil **6:** 36

Amendicus

JUL 3 1 2019 I ALBRITTON

## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: Pidale Commercial, 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:	
KNSTIN DIADLE Name of Person	
Ridale Commercial LLC Firm/Company	
4678 WOOD Creek it	
Perysburg. OH 4355  City/State and Zip Code  KNSTIN @ PIANE - Services. com E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Kristin Riddle at (419) 308-3509  Name of Person Area Code Daytime Telephone Number	
Enclosed is a check for the following amount:	
□ \$25.00 Filing Fee □ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee,  Certificate of Status Certified Copy (additional copy is enclosed) 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

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Riddle	Commercial, L	LC records )
(Name of the Lithited Ed (A F)	ability Company as it now appears on our rorida Limited Liability Company)	ecorus.)
The Articles of Organization for this Limited Liabili Florida document number <u>L 1900016</u>		28/2019 and assigned
This amendment is submitted to amend the following	g:	
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 AL	DDRESS)	
		2013
		<u>.</u>
Enter new mailing address, if applicable:		10 =
(Mailing address MAY BE A POST OFFICE BOX	<u> </u>	
		<del></del>
B. If amending the registered agent and/or r	registered office address on our re-	cords, enter the name of the nev
registered agent and/or the new registered office	address here:	
Name of New Registered Agent:		
New Registered Office Address:		
New Registered Street Hadrons.	Enter Florida street o	uddress
		, Florida
_	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>	Name	Address	Type of Action
AMBR @ KVÍSTIN F	Kvistin Ridale	14678 Wood Creek G. Pernysburg, OH 43551	Ø Add
		16449 Daly 7011 (2331	□ Remove
			Change
			D Add
			□ Remove
			Change
			Pemove
			□ Remove
			□ Remove
			Change
			□ Remove
			□ Change

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(If an ef Note:	ive date, if other than the date of filing:
	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 90th day after the record is filed.
Dated	7-19-19
	Signature of a member or adthorized representative of a member
	KRISTIN RIDDLE  Typed or printed name of signee

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Filing Fee: \$25.00