

Toll Free: 877.767.3453 | Central Ohio: 614.466.3910

OhioSoS.gov | business@OhioSoS.gov

File online or for more information: OhioBusinessCentral.gov

Filing Form Cover Letter

Please return the approval certificate to:

Name (Individual or Business Name):					
To the Attention of	of (if necessary):				
Address:					
City:					
State				ZIP Code:	
Phone Number:		E-mail Addı	ress:		
	would like to be signed up fo			stem for the business entity bei a e-mail when any document is	
	or money orders payable to: eing Requested: (PLE		•		
_	proximately 3-7 business			rm is required and the filing time may vary based on th	_
Expedite Service 1: By including an Expedite fee of \$100.00, in addition to the regular filing fee on page one of the form, the filing will be processed within 2 business days after it is received by our office.					
O one of the form,	the filing will be processe	d within 1 busi	iness da	n addition to the regular fi y after it is received by our ne document to the Client S	office. This
one of the form,	the filing will be processe	d within 4 hou	rs after i	n addition to the regular fi t is received by our office, i eliver the document to the C	if received by 1:00

Preclearance will be complete within 1-2 business days.

Preclearance Filing: A filing form, to be submitted at a later date for processing, may be submitted to be examined for the purpose of advising as to the acceptability of the proposed filing for a fee of \$50.00. The

Form 543A Prescribed by:



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For screen readers, follow instructions located at this path.

Mail this form to one of the following:

Regular Filing (non expedite) P.O. Box 1329 Columbus, OH 43216

Expedite Filing (Two business day processing time. Requires an additional \$100.00)

P.O. Box 1390 Columbus, OH 43216

Domestic Limited Liability Company Certificate of Amendment or Restatement

Filing Fee: \$50
Form Must Be Typed

(CHECK ONLY ONE (1) BOX)

(1) Domestic Limited Liability Company	(2) Domestic Limited Liability Company				
☐ Amendment (129-LAM)	Restatement (142-LRA)				
Date of Formation (MM/DD/YYYY)	Date of Formation (MM/DD/YYYY)				
, ,					
The undersigned authorized representative of:					
Name of Limited Liability Company					
Registration Number					
If how (4) Amondment is absolved, only complete.	sections that apply. If box (2) Restatement is checked, all				
sections below must be completed.	sections that apply. If box (2) Restatement is checked, all				
The name of said limited liability company shall be:					
Name must include one of the following words or abbreviations: "limited liability company," "limited," "LLC," "L.L.C.," "Itd." or "Itd"					
This limited liability company shall exist for a period of	S f.				
This inflited liability company shall exist for a period c	Period of Existence				
Purpose	r shed si Zaistanes				
T dipose					

By signing and submitting this form has the requisite authority to execut	to the Ohio Secretary of State, the undersigned hereby certifies that he or she te this document.
Required	
Must be signed by a member, manager or other representative.	Signature
If authorized representative is an individual, then they must sign in the "signature" box and print their name	By (if applicable)
in the "Print Name" box.	Print Name
If authorized representative is a business entity, not an individual, then please print the business name in the	
"signature" box, an authorized representative of the business entity	Signature
must sign in the "By" box and print their name in the "Print Name" box.	By (if applicable)
	Print Name
	Signature
	By (if applicable)
	Print Name

Instructions for Limited Liability Company Certificate of Amendment or Restatement

This form should be used if you wish to file an amendment or restatement to the articles of organization for a domestic limited liability company.

Pursuant to Ohio Revised Code §1705.08, the articles of organization of a limited liability company may be amended at any time, but a certificate of amendment amending the articles of organization shall be filed within thirty days after the occurrence of any of the following: (1) the name of the limited liability company is changed; (2) the period of the limited liability company's duration is changed; or (3) any other information that is set forth in the articles of organization is changed. An authorized representative of the limited liability company must file an amendment upon discovering that a statement in the articles of organization was materially false when made or that any other information set forth in the articles of organization has changed making the articles materially inaccurate.

The articles of organization of a limited liability company may be restated at any time by filing a restatement of the articles of organization.

If you wish to file an amendment, please select box 1. If you wish to file a restatement, please select box 2. As required by Ohio Revised Code §1705.08 (C)(1)(b), indicate the date of the filing of the limited liability company's articles of organization that are being amended.

Name of Limited Liability Company

Indicate the name of the limited liability company and the registration number. If you choose to change the name of the limited liability company, the name must include one of the following: "limited liability company," "limited," "LLC," "LLC.," "ltd." or "ltd", pursuant to Ohio Revised Code §1705.05.

Period of Existence

A period of existence may be provided but is not required. Pursuant to Ohio Revised Code §1705.04 (B), if a period of existence is not provided in the articles the limited liability company's period of existence is perpetual.

Purpose Clause

A purpose clause may be provided but is not required. As stated in Ohio Revised Code §1705.02, a limited liability company may generally "be formed for any purpose or purposes for which individuals lawfully may associate themselves."

Additional Provisions

If the information you wish to provide for the record does not fit on the form, please attach additional provisions on a single-sided, $8 \frac{1}{2} \times 11$ sheet(s) of paper.

Signature(s)

After completing all information on the filing form, please make sure that page 2 is signed by at least one authorized representative of the limited liability company.

**Note: Our office cannot file or record a document that contains a social security number or tax identification number. Please do not enter a social security number or tax identification number, in any format, on this form.