



DATE	DOCUMENT ID	DESCRIPTION	FILING	EXPED	PENALTY	CERT	COPY
02/12/2016	201604202656	Fictitious Name/Business Address Change (NFB)	25.00	0.00	0.00	0.00	0.00

Receipt

This is not a bill. Please do not remit payment.

ERIC TOLBERT
1422 EUCLID AVE
SUITE 1564
CLEVELAND, OH 44115

STATE OF OHIO CERTIFICATE

Ohio Secretary of State, Jon Husted
1624579

It is hereby certified that the Secretary of State of Ohio has custody of the business records for
**ERIC TOLBERT & ASSOCIATES, A FINANCIAL ADVISORY PRACTICE OF AMERIPRISE
FINANCIAL SERVICES INC.**
and, that said business records show the filing and recording of:

Document(s)

Fictitious Name/Business Address Change

Effective Date: 02/10/2016

Document No(s):

201604202656



United States of America
State of Ohio
Office of the Secretary of State

Witness my hand and the seal of the
Secretary of State at Columbus, Ohio this
12th day of February, A.D. 2016.

Ohio Secretary of State



Form 524A Prescribed by:

JON HUSTED
 OHIO SECRETARY OF STATE

 Toll Free: (877) SOS-FILE (877-767-3453)
 Central Ohio: (614) 486-3910

www.OhioSecretaryofState.gov
busserv@OhioSecretaryofState.gov
File online or for more information: www.OHBusinessCentral.com

Mail this form to one of the following:

 Regular Filing (non expedite)
 P.O. Box 788
 Columbus, OH 43216

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

 P.O. Box 1390
 Columbus, OH 43216

Trade Name or Fictitious Name Registration Update

Filing Fee: \$25

2016 FEB 10 PM 1:27

- (1) ☐ Assignment of Registered Name (116-RNA)
- (3) ☒ Change of Address for Registrant (176-RNB)
- (5) ☐ Change of Partners of Registrant, if Registrant is a General Partnership (999-GEN)

- (2) ☐ Change of Nature of Business (999-GEN)
- (4) ☐ Cancellation of Registration (184-RNX)

 Trade Name or Fictitious Name

 Registration Number

 Name of Current Registrant
Complete the information in this section if box (1) is checked above

 New Registrant's Name

 New Registrant's Charter/Registration/License Number in Ohio (if applicable)

New Registrant's Address

 Mailing Address

 City State ZIP Code

If new registrant is a General Partnership NOT registered in Ohio pursuant to ORC 1776, please provide the name and address of at least one general partner.

Name

Address

Note: Pursuant to OAG 89-081, if a general partner is a foreign corporation/limited liability company, it must be licensed to transact business in Ohio.

Complete the information in this section if box (2) is checked

The general nature of business conducted by the registrant:

Complete the information in this section if box (3) is checked

Registrant's New Address

Mailing Address The Hanna Building, Suite 1564 1422 Euclid Avenue

City Cleveland

State Ohio

ZIP Code 44115

No additional information required if box (4) is checked above. Please sign form below.**Complete the information in this section if box (5) is checked**

New General Partner(s) names(s) and addresses

Name

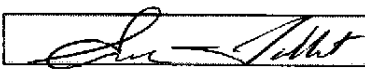
Address

Note: Pursuant to OAG 89-081, if a general partner is a foreign corporation/limited liability company, it must be licensed to transact business in Ohio.

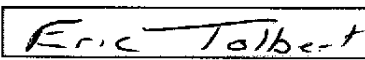
By signing and submitting this form to the Ohio Secretary of State, the undersigned hereby certifies that he or she has the requisite authority to execute this document.

Required

Application must be signed by the registrant or an authorized representative.


 Signature

By (if applicable)


 Print Name

If authorized representative is an individual, then they must sign in the "signature" box and print their name in the "Print Name" box.

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 must sign in the "By" box and print their name in the "Print Name" box.