I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.					
SIGNATURE: CHRISTOPHER S. HOEFLY	MANAGER	10/18/2020			

Electronic Signature of Signing Authorized Person(s) Detail

Entity Name: RIVES HOEFLY ML, LLC

Current Principal Place of Business:

9375 S.E. 110TH STREET ROAD BELLEVIEW, FL 34420

Current Mailing Address:

9375 S.E. 110TH STREET ROAD BELLEVIEW, FL 34420 US

FEI Number: 32-0416326

Name and Address of Current Registered Agent:

HOEFLY, CHRISTOPHER S 9375 S.E. 110TH STREET ROAD BELLEVIEW, FL 34420 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

	SIGNATURE	TURE: CHRISTOPHER S. HOEFLY			10/18/2020	
		Electronic Signature of Registered Agent			Date	
Authorized Person(s) Detail :						
	Title	MANAGER	Title	MANAGER		
	Name	HOEFLY, CHRISTOPHER S	Name	RIVES HOEFLY, T. NANETTE		
	Address	9375 S.E. 110TH STREET ROAD	Address	9375 S.E. 110TH STREET ROAD)	
	City-State-Zip:	BELLEVIEW FL 34420	City-State-Zip:	BELLEVIEW FL 34420		

Certificate of Status Desired: No

Date

FILED Oct 18, 2020 Secretary of State 1692287162CR

DOCUMENT# L13000102569

2020 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT