35/24/

(Requestor's Name)
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PICK-UP WAIT MAIL
Anna - Friedrich
(Business Entity Name)
(Document Number)
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RA. Charry 2. Onellow DEC 1 6 2004

Riviera Land Corp. () Profit () Amendment () Merger () Nonprofit () Mark () Foreign - () Dissolution/Withdrawal () Reinstatement () Annual Report () Limited Partnership () Other COChange of RA () Name Registration ()LLC () Fictitious Name () UCC () Certified Copy () Photocopies () CUS () Call When Ready () Call If Problem () After 4:30 (x) Walk In () Will Wait (x) Pick Up () Mail Out 12/14/2004 Name Order#: 6244755 Availability Document **AAM** Examiner ___ Ref#: Updater ___ Verifier ____

660 E. Jefferson St., Tallahassee, FL, 32301

850-222-1092

Amount: \$

CT Corporation System

W.P. Verifier ____

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sect	tions 607.0502, 617.0502	2, 607.1508, or 617.1508, Fi	lorida Statutes
this statement of change is submitte	ed for a corporation orga	nized under the laws of the S	tate of
Florida in order to c	change its registered offic	ce or registe <mark>red agent, o</mark> r bo	th, in the State
of Florida.			
1. The name of the corporation: Ri	iviera Land Corp.	- a	
2. The principal office address:			4 C C C C C C C C C C C C C C C C C C C
700 N.W. 107th Avenue, Miami, FL	33172		SO B
3. The mailing address (if different)			ARY C
4. Date of incorporation/qualification	on: <u>8/25/1969</u>	Document number: 35124	197 5
5. The name and street address of the Florida Department of State:	he current registered agen	at and registered office on file	with the
	Benjamin P. Butterfield,	Esq.	
	700 N.W. 107th Avenue, 4t	th Floor	
	Miami, FL 33172		
6. The name and street address of	f the new registered ager		tered office (if
changed):	C T Corporation Syste	em	
	c/o C T Corporation Sys	stem	
	(P.O. Box or personal mailbox NOT		
1200 So	uth Pine Island Road, Plantati	on, Florida 33324	
The street address of its registered agent, as changed will be identical	office and the street addi	ress of the business office of	its registered
Such change was authorized by res authorized by the board, or the cor	solution duly adopted by poration has been notifie	its board of directors or by a d in writing of the change.	n officer so
(Signature of an officer, chairman or vice chairman	of the board)	(Printed or typed name and title)	VP.
I hereby accept the appointment as I further agree to comply with the p performance of my duties, and I an registered agent. Or, if this docum office address, I hereby confirm the	provisions of all statutes	relative to the proper and co	omplete ion as gistered schange.
C T Corporation System	- · · · · · · · · · ·		
By: (Signature of Registered Agent	t)	12/13/04 (Date)	
If signing on behalf of an entity:	_	(aryun)	
is organize our overant or an oriaty.	CONNIE BRYAN - SPECIAL ASSISTANTS	PCDETARN/	
(Typed or Printed Name)		(Capacity)	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE AND MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

* * * FILING FEE: \$35.00 * * *