## 420659

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Duning on Entite Name)
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



700057312227

07/18/05--01025--018 \*\*35.00

05 JUL 18 PN 1:0; SECRETARY OF STATE TALLAHASSEE FLORIDA



## **COVER LETTER**

	ent Section of Corporations	
SUBJECT: River	side Paper Co., Inc.	
	(Name o	f corporation)
DOCUMENT NU	JMBER: 420659	
The enclosed State	ement of Change of Registered Of	fice/Agent and fee are submitted for filing.
Please return all co	orrespondence concerning this ma	iter to the following:
	Howard J. Steirn	
	(Name of	contact person)
Riv	verside Paper Co., Inc.	(Company)
	(rum	Company)
<u> 1</u>	P.O. Box 133650	
	(A	ddress)
	Miami, Florida 33013	
	(City/state	and zip code)
For further inform	ation concerning this matter, pleas	e call:
Howard J. Steirn		at (305 722-0110
(Na	ame of contact person)	(Area code & daytime telephone number)
Enclosed is a \$35.0	00 check made payable to the Dep	artment of State.
	Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399

CR2E045(6/04)

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Floridain order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Riverside Paper Co., Inc.
2. The principal office address: 3505 N.W. 112 Street Miami, Florida 33167
3. The mailing address (if different): P.O. Box 133650 Miami, Florida 33013
4. Date of incorporation/qualification: 3/8/1973 Document number: 591446175
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
Marshall L. Steirn
5770 N.W. 36 Avenue
Miami, Florida 33142
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Howard J. Steirn
3505 N.W. 112 Street
(P.O. Box NOT acceptable)
Miami, Florida 33167
The street address of its registered office and the street address of the business office of its registered agents as changed will be identical.
Such change was authorized by resolution duly adopted by its board of directors or by an other so
(Signisture of an officer of director)  Marshall L. Steirn, President  (Printed or typed name and title)
hereby accept the appointment as registered agent and agree to act in this capacity. 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 obligation of my position as registered agent. Or, if this locument is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.
7.13.05
(Signature of Registered Agent) (Date)
f signing on behalf of an entity:  Howard J. Steley
(Typed or Printed Name)

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