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



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MAY 1 4 2018 I ALBRITTON \* Kenneth S. Direktor, Esq. Shareholder

Phone: (954) 965-5050 Fax: (954) 985-4176

kdirektor@beckerlawyers.com

Becker & Poliakoff I East Broward Blvd. Suite 1800 Ft. Lauderdale, Florida 33301

May 8, 2018

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Re: River Reach, Incorporated

Document No. 717900

Dear Sir or Madam:

Enclosed please find the Statement of Change of Registered Office/Agent form along with Check #17066 in the amount of \$35.00 made payable to the Florida Department of State to cover the cost of filing.

Should you have any questions, please do not hesitate to contact me. Thank you.

Very truly yours,



Kenneth S. Direktor

For the Firm

KSD/og Enclosures

ACTIVE: R11944/239009;10894526\_1

Becker

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

| statement of cha   | provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this inge is submitted for a corporation organized under the laws of the State of Florida er to change its registered office or registered agent, or both, in the State of Florida.   |
|--|---|
| <ol> <li>The name of</li> <li>The principal</li> </ol>                                     | the corporation: RIVER REACH, INCORPORATED office address: 949 RIVER REACH DR. FORT LAUDERDALE, FL 33315  |
| 3. The mailing a   | address (if different):   |
| 4. Date of incor   | poration/qualification: 01/15/1970 Document number: 717900  |
|  | d street address of the current registered agent and registered office on file with the rtment of State: (If resigned, enter resigned)  |
|  | Becker & Poliakoff 635 N. Flactor Dr. 7th Flact   |
|  | West Palm Beach, FL 33401   |
| 6. The name and (if changed):  | West Palm Beach, FL 33401  I street address of the new registered agent (if changed) and /or registered office  |
|  | BECKER & POLIAKOFF, P.A.  1 E. BROWARD BLVD., STE, 1800   |
|  |   |
|  | FORT LAUDERDALE, FL 33301   |
| The street address changed will  | ess of its registered office and the street address of the business office of its registered agent, be identical.   |
| Such change wa   | as authorized by resolution duly adopted by its board of directors or by an officer so board of the corporation has been notified in writing of the change.   |
| Signatu  | re of an officer or director Printed or typed name and title  |
| I hereby accept<br>I further agree<br>performance of<br>agent. Or, if th<br>hereby confirm | the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and complete my duties, and I am familiar with and accept the obligation of my position as registered is document is being filed merely to reflect a change in the registered office address, I that the corporation has been notified in writing of this change. |
| Cir  | 5/8/2018  |
| ·  | half of an entity:  |
| Kenneth S.   | ·   |
|  | voed or Printed Name  |

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

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