L0400000 4954

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



300162057233

10/26/09--01062--001 **55.00

Office Use Only

M. THOMAS

OCT 27 2009

FXARAINIE

COVER LETTER

TO: Registration S Division of Co		•	
SUBJECT: Rive	e <u>rside Estates, LL</u> Name of Lim	C ited Liability Company	
	f Amendment and fee(s) are su ondence concerning this matte	· ·	
	John B. Boy,	Name of Person	
•	Riverside Est	·	7 72
•		Firm/Company	PER S
	P. O. Box 490		
•		Address	SSE O M
	LaBelle, Flor	rida 33975-0490 City/State and Zip Code	THE ED WII: 12 SECRETARY OF STATE TALLANDSSEE. FLORIDO
	bmkpcpas@aol E-mail address: (COM to be used for future annual report notifica	ution)
For further information	concerning this matter, please o	all:	
John Name o	B. Boy, Jr.	at (863) 675-3777 Area Code & Daytime T	Celephone Number
Enclosed is a check for t	he following amount:		
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$\infty\$\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

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

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Riverside Estates	LLC .		
(Name of the Limited I (A)	Liability Company as it now apper Florida Limited Liability Company	ars on our records.)	
The Articles of Organization for this Limited Lia	bility Company were filed on	January 19, 2	2004 and assigned
Florida document number <u>#L0400004954</u>	·		
This amendment is submitted to amend the follow	ving:		
A. If amending name, enter the new name of t	he limited liability company h	ere:	
The new name must be distinguishable and end with	the words "Limited Liability Com	pany," the designation	"LLC" or the abbreviation
"L.L.C."		•	ZOUS OCT
Enter new principal offices address, if applical	ole:		- ES
(Principal office address MUST BE A STREET	ADDRESS)		P 2 1
Enter new mailing address, if applicable: <u>Mailing address MAY BE A POST OFFICE Bo</u> B. If amending the registered agent and/or	registered office address on	our records, enter	the name of the new
registered agent and/or the new registered office	<u>ce address here</u> :		
Name of New Registered Agent:	John B. Boy, Jr.		
New Registered Office Address:	90 Yeomans Avenu		
	E	nter Florida street a	ddress
	LaBelle	, Florida _	33935
	City		Zip Code

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I 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 obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Page 1 of 2

Signature of New Registered Agent

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

M = Member MGR = Manager

MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Charles F. Svirk, Jr.	2480 East State Road 80	Add
		LaBelle, Florida 33935	☐ Xuu X Remove
MGR	John B. Boy, Jr.	P.O. Box 490 LaBelle, Florida 33975	X Add Remove
MGR	David N. Miller	P. O. Box 490 LaBelle, Florida 33975	X Add Remove
MGR	Joseph P. Branch	P. O. Box 430 Moore Haven, Florida 33471	X Add Remove
<u>M</u>	CHL HOldings, Inc.	2480 East State Road 80 LaBelle, Florida 33935	TALLAND AGENTAL SEE
<u>M</u>	Riverside Investors of Moore Haven, INc.	P. O. Box 490 LaBelle, Florida 33975	Fig. 1
D. If amend	ing any other information, enter chang	e(s) here: (Attach additional sheets, if necessary	——————————————————————————————————————
Dated Oct	tober 22 , 200	g or authorized representative of a member	
•		or printed name of signce	

Page 2 of 2

Filing Fee: \$25.00