

W4 0000 21769

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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MAIL

(Business Entity Name)

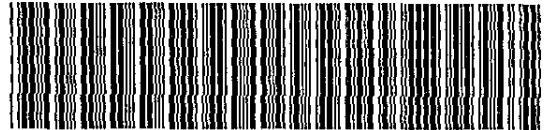
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

W4-21769
ax



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

October 12, 2004

MARY BRADFORD
1281 NW 78TH AVENUE
PLANTATION, FL 33322

SUBJECT: RIVERS LLC
Ref. Number: L04000021769

We have received your document for RIVERS LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6020.

Tammi Cline
Document Specialist

Letter Number: 104A00058852

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: RIVERS LLC
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

MARY BRADFORD
LINDA GOSSETT
(Name of Person)

RIVERS LLC
(Firm/Company)

1281 NW 78TH AVE
(Address)

PLANTATION FL 33328
(City/State and Zip Code)

For further information concerning this matter, please call:

LINDA GOSSETT at (954) 370-4811
(Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:
Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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September 13, 2004

Department of State
Registration Section, Div. Of Corp.
409 E Gaines St.
Tallahassee, FL 32399

RE: Rivers LLC

To Whom It May Concern:

The current address of Rivers LLC is:

Rivers LLC
2731 SW 86th Way
Davie, FL 33328

The address is to be changed, effective this date, to:

Rivers LLC
1281 NW 78th Ave
Plantation, FL 33324

Thank you.

Sincerely,



Linda Gossett
Registered Agent

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

04 OCT 25 AM 10:37

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**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR
BOTH FOR LIMITED LIABILITY COMPANY**

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the limited liability company is: RIVERS LLC
2. The mailing address of the limited liability company is : 1281 NW 78TH AVE
PLANTATION FL 33322
3. Date of filing/registration in Florida 3/11/04
4. Document number L 04000021769

5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

LINDA GOSSETT
Name
1281 NW 78TH AVE
Address
PLANTATION FL 33322
City, State and Zip

6. The name and address of the new registered agent and/or office:

MARY BRADFORD
Name
1281 NW 78TH AVE
Florida street address (P.O. Box NOT acceptable)
PLANTATION FL 33322
City, State and Zip

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

William C. Gossett
(Signature of a member or authorized representative of a member)

WILLIAM C. GOSSETT
(Printed or typed name of signer)

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.

Mary Bradford
(Signature of Registered Agent)

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

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04 OCT 25 AM
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SECRETARY OF STATE