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COVER LETTER

TO: Registration Section Division of Corporations					
SUBJECT:	River Colen Investments LLC (Name of Limited Liability Company)				
The enclosed Articles of A	Amendment and fee(s) are submitted for filing.				
Please return all correspo	indence concerning this matter to the following:				
	Mallory Coayle Holm, Esq.				
	SL6 Management Services, LLC (Firm/Company)				
	4315 Pablo Daks Court, Suite (Address)	١			
	Jacksonville FL 32224 (City/State and Zip Code)				
For further information co	oncerning this matter, please call:				
Mallory (Name o	Gayle Holm at (904 482 - 1144 (Area Code & Daytime Telephone Number)				
Enclosed is a check for the	e following amount:				
\$25.00 Filing Fee	\$30.00 Filing Fee & \$55.00 Filing Fee & \$60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) 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

FILED

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

08 APR 18 PM 2: 18

RGANIZATION SECRETARY OF STATE TALLAHASSEE FLORIDA

(Name of the Limited Liability Company as it now appears on our records.)

(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on <u>Uctober</u> <u>L. 2004</u> and assigned Florida document number <u>L. 040067256</u>

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

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 address here:

Name of New Registered Agent:

SLLO Management Services, UC

New Registered Office Address:

4315 Pablo Daks Court, Suite

(Enter Florida street address)

Jacksonuile, Florida 32224
(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.

(If Changing Registered Agent, Signature of New Registered Agent)

John C) Kunkel Vica Picaident 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:

MGR = Manager

MGRM	= Managing Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add Remove
*			Add Remove
	<u> </u>		Add Remove
	-		Add Remove
			Add Remove
			Add Remove
D. If am	ending any other information, enter change	(s) here: (Attach additional sheets, if necessary.)	
Dated	Article U- Mana amended and as Follows: The company is to General Managers April 11, 20	sement is hereby restated in its en limited liability be managed by a Sho Management services. LLC productionized representative of a member	08 APR 18 PH

Filing Fee: \$25.00