L07000082187

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C. LEWIS

JUL 6,2009

EXAMINER



FLORIDA DEPARTMENT OF STATE Division of Corporations

July 6, 2009

RICHARD L. WALTERS R R RIVA, LLC 1314 E. LAS OLAS BLVD., STE. 101 FT. LAUDERDALE, FL 33301

SUBJECT: R R RIVA, L.L.C. Ref. Number: L07000082187

We have received your document for R R RIVA, L.L.C. 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 the corrected original and one copy of 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) 245-6047.

Letter Number: 609A00022963

Carolyn Lewis
Regulatory Specialist II
Registration/Qualification Section

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: R. R. WA, LLC Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Richard L WATERS Name of Person
RR. RIVA 1/C
1314 £. /AS Olas B/VO#101
FORT LAUDERDALE FLA. 3330/ City/State and Zip Code
SR 84 (AH. NET E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Nichard h. Watters Name of Person at (754 224-8598) Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\ \text{Certificate of Status} \text{S55.00 Filing Fee & Certified Copy (additional copy is enclosed)} \$\$\$ \$60.00 Filing Fee, \$\$\$ \$\$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

FILED 2009 JUL 21 PM 2: 22

Zip Code

•	Jr.	7009 JOE E.
(Name of the Limited Liability Comp	AC	SECRETARY OF STATE TALLAHASSEE, FLORIDA
(<u>Name of the Limited Liability Comp</u> (A Florida Limited	Liability Company)	<u></u>)
The Articles of Organization for this Limited Liability Compar	ny were filed on $8/9/2007$	and assigned
Florida document number <u>Lo76000 82 187</u>		-
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	bility company here:	
The new name must be distinguishable and end with the words "Lir"L.L.C."	mited Liability Company," the designation	ion "LLC" or the abbreviation
Enter new principal offices address, if applicable:	1314 E./AS OF	15 K/10 101
(Principal office address MUST BE A STREET ADDRESS)	FORT LANDERDALE,	Fla 3330/
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1314 E. LAS DLAS SUITE #101 FORT LAUDERDAL	Blvo.
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address he		ter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida stree	t address
	, Florid	a

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.

City

If Changing Registered Agent, 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:

	<u>Name</u>	Address	Type of Action
			Add Remove
	<u> </u>		□ p
			Add Remove
_			Add Remove
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meno	ding any other information, ente	r change(s) here: (Attach additional she	ets, if necessary.)
			TALL-A
	July 1900,	2069	2009 JUL 21 PM 2: 22 SCURE TARY OF STATE A TALL-AHASSEE. FLORIDA ember

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Filing Fee: \$25.00