

L 080000 70584

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

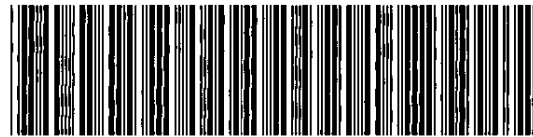
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B. KOHR

JUL 23 2008

EXAMINER



600132933156

RECEIVED
08 JUL 23 PM 1:37
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

B. KOHR

JUL 23 2008

EXAMINER

FILED
08 JUL 23 PM 2:15
TALLAHASSEE, FLORIDA
STATE



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032
REFERENCE : 658633 4802844
AUTHORIZATION : *[Signature]*
COST LIMIT : \$ 25.00

ORDER DATE : July 23, 2008
ORDER TIME : 12:31 PM
ORDER NO. : 658633-005
CUSTOMER NO: 4802844

FILED
08 JUL 23 PM 2:15
TALLAHASSEE, FLORIDA

DOMESTIC AMENDMENT FILING

NAME: RIVO ALTO MEDLEY HOLDINGS, LLC

EFFECTIVE DATE:

XX ARTICLES OF AMENDMENT
 RESTATED ARTICLES OF INCORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Debbie Skipper -- EXT# 2948

EXAMINER'S INITIALS: _____

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

RIVO ALTO MEDLEY HOLDINGS, LLC

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

FILED
08 JUL 23 PM 2:15
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 7/22/08 and assigned
Florida document number L8000070584.

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 "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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:

New Registered Office Address:

(Enter Florida street address)

(City), Florida (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)

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>	<u>Address</u>	<u>Type of Action</u>
MGR	MARK FELDMAN	1930 HARRISON ST STE 404 HOLLYWOOD, FL 33020	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	JOEL EIDELSTEIN	1930 HARRISON ST STE 404 HOLLYWOOD, FL 33020	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	DAVEJI LAKES, LLC	1930 HARRISON ST STE 404 HOLLYWOOD, FL 33020	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Dated JULY 23, 2008.

Karen M. McElligatt
Signature of a member or authorized representative of a member
Karen M. McElligatt
Typed or printed name of signee