## L10000010348

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(Address)				
(Address)				
(Ci	ty/State/Zip/Phon	e #)		
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## COVER LETTER

Division of Corporations	
SUBJECT: Riverside Plaza B LLC	
Name of	Limited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office	Change and fee(s) are submitted for filing.
Please return all correspondence concerning this m	natter to the following:
Irving G. Snyder, Jr.	
Name of Person	<del></del>
Diamond S Inc.	
Firm/Company	
13747 Hope Sound Ct.	
Address	
Jacksonville, FL 32225	
City/State and Zip Code	<del></del>
DiamondSinc@embarqmail.com	
E-mail address: (to be used for future annual	report notification)
For further information concerning this matter, ple	ase call:
Irving G. Snyder, Jr.	503 997-7738
Name of Person	Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclosed is a check for the following am	ount:
S25 Filing Fee	☐ \$55 Filing Fee & Certified Copy

INHS18 (2/14)

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

Pursuant to the provisions of sections 605.0114 or 605.0116, 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

Name	e of the limited liability company: Riverside Plaz	a B LLC	
	3747 Hope Sound Court	(b) Same	
. <b>u</b> )	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ (0/	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Jacksonville		
F	FL 32225		
7.	7/01/2010	L10000	0070348
	Date of filing/registration in Florida	4.	Document number
(a) N	NRAI Services, Inc.		
	egistered Agent and Registered Office shown on the records of the	ne Florida Dept. of S	State:
2	2731 Executive Park Drive, Suite 4		
R	Registered Office Address (MUST BE FLORIDA STREET A	DDRESS)	<del></del>
V	Weston	33331	<del></del>
-	, FL		
b) Îr	vìng G. Snyder, Jr		— 25 Sec.
	inter name of NEW Registered Agent and/or NEW Registered (	Office address:	- 1
	407.7.1		
_	13747 Hope Sound Ct.		<u> </u>
N	NEW Registered Office Address:		
-	Jacksonville	32225	<del>_</del>
_	Jacksonville , FL'	32225	<u></u>
e lim	nited liability company is not organized under the law	s of the State of	Florida, it is hereby confirmed that after
hang	ge or changes are made, the Florida street address of the identical. Or, in the case of a Florida limited lia	the registered of	fice and the business office of the registe
t wii were	e authorized by an affirmative vote of the members of	the limited liab	ility company or as otherwise provided i
rticle	es of organization or the operating agreement of the l	limited liability	company.
	modern.	Irving	Printed or typed name of signee
_	e of a member or authorized representative of a member		J •
reby visión obliga	accept the appointment as registered agent and agrees of all statutes relative to the proper and complete pations of my position as registered agent as provided preflect a change in the registered office address, I have been accepted to the complete and the com	ee to act in this c performance of i for in Chapter	capacity. I further agree to comply with my duties, and I am familiar with and acc 605, F.S. Or, if this document is being fi
erely ied i	in writing of this change.	erevy conjirm ii	nat the limitea Hability company has been