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S. HAWKES

OCT 2 0 2010

EXAMINER

COVER LETTER

	stration Sec sion of Corp		• •		
SUBJECT: RVRLND PROPERTIES, LLC Name of Limited Liability Company					
Please return a	all correspor	ndence concerning this matter	to the following:		
			Michel Pailhes Name of Person		
				·	
535			Firm/Company Harrison Avenue #A606		
535 Harrison Avenue #A606 Address					
	Boston, MA 02116 City/State and Zip Code				
		mic E-mail address: (helpailhes@yahoo.com to be used for future annual report not	ification)	
For further inf	ormation co	ncerning this matter, please of	eall:		
David M. Datz Name of Person		at (617) Area Code & Daytir	357-9333 ne Telephone Number		
			·	·	
Enclosed is a	check for the	e following amount:			
✓ \$25.00 Fili	ng Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclose	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		STREET/COUR Registration Secti Division of Corpo Clifton Building 2661 Executive C Tallahassee, FL 3	orations Center Circle		

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

RVKLIV	ND PROPERTIES, LLC	
(Name of the Limited Liab (A Flor	oility Company as it now appears ida Limited Liability Company)	s on our records.)
The Articles of Organization for this Limited Liabili Florida document number		August 13, 2010 and assigned
This amendment is submitted to amend the following	g:	2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2
A. If amending name, enter the new name of the	limited liability company here	: 9 5
The new name must be distinguishable and end with the "L.L.C."	words "Limited Liability Compar	y," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	:	
(Principal office address MUST BE A STREET AL	ODRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	2	
B. If amending the registered agent and/or re registered agent and/or the new registered office a		or records, enter the name of the nev
Name of New Registered Agent:	<u> </u>	
New Registered Office Address:		
	Ente	er Florida street address
		, Florida
	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

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 = M	Janaging Member		
<u>Title</u>	Name	Address	Type of Action
MGRM	CORY FRITZLER	370 DELAWARE AVE FORT LAUDERDALE, FL. 33312	Add Remove
<u>MGRM</u>	ERIC BOULIANNE	3950 SPRIN VALLEY RD FARMERS BRANCH, TX. 75244	Add ✓ Remove
MGRM	MICHEL PAILHES	535 HARRISON AVE #606 BOSTON, MA 02118	Add ☑ Remove
MGR_	ERIC BOULIANNE	3950 SPRIN VALLEY RD FARMERS BRANCH, TX, 75244	Add Remove
MGR_	MICHEL PAILHES	535 HARRISON AVE #A606 BOSTON, MA. 02118	Add Remove
D. If amend	ling any other information, enter char	nge(s) here: (Attach additional sheets, if necessary.	, T-114 X. 4
 Dated	-	er or authorized representative of a member Michel Pailhes	10 OCT 19 PH 3: 19
	Турс	ed or printed name of signee	

Page 2 of 2

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