L10000113359

(Re	equestor's Name)	
(Ad	dress)	
(Ac	ldress)	
(Cit	ty/State/Zip/Phone	÷#)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nan	ne)
· (Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
		-
:		

Office Use Only



700279800627

12/09/15--01011--031 **25.00

PILED

2015 DEC -9 A ID: 53

BECKETARY OF STATE
ARCHIVESEF, FLORIDA

DEC 0 9 2015

3 MASON

COVER LETTER

TO:	Registration Se Division of Cor			
		RIVILO	ON PROPERTIES LLC	
SUBJ	ECT:	Name of Limi	ted Liability Company	
The er	nclosed Articles of	Amendment and fee(s) are subt	mitted for filing.	
Please	return all correspo	ndence concerning this matter	to the following:	
			PEARLY MIRON	
			Name of Person	
		RI	VILON PROPERTIES LLC	
			Firm/Company	
		3410	GALT OCEAN DRIVE, APT 160	02
			Address	
		F	ORT LAUDERDALE, FL 33308	
			City/State and Zip Code	· ··
•			Pearly.Miron@gmail.com	
		E-mail address: (o be used for future annual report not	ification)
For fu	rther information co	oncerning this matter, please ca	ill:	
	PEAR	LY MIRON	954 5	37-4031
	Name o	f Person	Area Code Daytin	ne Telephone Number
Enclos	sed is a check for th	ne following amount:		
= \$2	25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$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/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

RIVI	LON PROPERTIES LLC		
(<u>Name of the Limited L</u> (A F	iability Company as it now appe forida Limited Liability Company	ars on our records.)	
The Articles of Organization for this Limited Liabil Florida document number	lity Company were filed on _	NOVEMBER 01, 2010	and assigned
This amendment is submitted to amend the following	ng:		
A. If amending name, enter the new name of the	e limited liability company l	here:	
The new name must be distinguishable and contain the words	"Limited Liability Company," the	designation "LLC" or the abbr	eviation "L.L.C."
Enter new principal offices address, if applicable	e:		
(Principal office address MUST BE A STREET A	DDRESS)		
•		<u> </u>	
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BO.	<u></u>	.	
		. <u>.</u>	<u> </u>
B. If amending the registered agent and/or registered agent and/or the new registered office		on our records, <u>enter t</u> l	ne name of the new
Name of New Registered Agent:			
New Registered Office Address:	Duran El	orida street address	
	Enter F t	oriaa sireei aaaress	
_	City	, Florida	Zip Code
New Registered Agent's Signature, if changing Regi			- ,
I hereby accept the appointment as registered as provisions of all statutes relative to the proper a accept the obligations of my position as register being filed to merely reflect a change in the register company has been notified in writing of this chain	gent and agree to act in this and complete performance of red agent as provided for in istered office address, I hero ange.	of my duties, and I am fai Chapter 605, F.S. Or, if eby confirm that the limi	miliar with and this document is ted liability
	If Changing Registered A	Agent, Signature of New Regi	F - 1
	Page 1 of 3	A 14 F ST/ F L 01	

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	SHAPIRO SHOW LTD	34 HABROSHIM STR, KADIMA	□ Add
		ISRAEL, 60920	■ Remove
			Change
MGRM	EITAN SHAPIRA	24 NATAN YONATAN STR	■ Add
		APT 96, NETANYA 4266000	□ Remove
		ISRAEL	Change
MGR	YARIV MIRON	4140 N 45TH AVE	
•		HOLLYWOOD, FL 33021	Remove
•			☐ Change
MGRM	YARIV MIRON	4140 N 45TH AVE	Add
		HOLLYWOOD, FL 33021	Remove
			Change
			□ Add
			Remove
		FLOR	Remove
			The Change

	. ; ·	enter change(s) here: (Attach additional sheets,	•
٠	, ,	M (1) - 1	
	·		
- , -			
f an effecti Note: If document te recor	the date inserted in this block do 's effective date on the Departm	ecific and cannot be prior to date of filing or more than 90 dates not meet the applicable statutory filing requirement of State's records. Ctive date, but not an effective time, at 12	nts, this date will not be listed a
Nata d	DECEMBER 7	2015	
ateu		11	
aleu		1 mlin	
aled	Signat	ure of a member or authorized representative of a member	
valed	Signat	ure of a member or authorized representative of a member	DEC -
zated	Signat	PEARLY MIRON	DEC -9
Dated	Signat		THASS

Filing Fee: \$25.00