# 110000128753

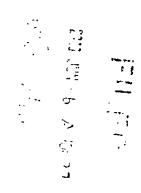
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
(City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status

Office Use Only



200329920652

06/06/13--01001--003 \*\*175.00



D SCOTT
JUN 2 0 2019

## **COVER LETTER**

Div	ision of Corp	porations					
CUDIECT.	Riverside H	eights, LLC					
SUBJECT:		Name of Limited Liability Company					
The enclosed	d Articles of /	Amendment and fee(s) are sub-	mitted for filing.				
Please return	ı all correspoi	ndence concerning this matter	to the following:		:		
		Carrie Christino			<b>'</b>		•
			Name of Person		<del></del> :	27	
		Soho Capital, LLC			4	7 7.3	
			Firm/Company				
		701 S Howard Ave Ste 100	6-322			L.	
			Address				
		Tampa, FL 33606					
			City/State and Zip Code				
		Carrie@soho-capital.com					
		E-mail address: (	to be used for future annual re	port notification)			
For further i	information co	oncerning this matter, please co	all:				
Carrie Chri	stino		813 557- at ( )	4901			
	Name o	f Person	at () Area Code	Daytime Telephone N	Number	_	
Enclosed is	a check for th	ne following amount:					
\$25.00	Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclo	Ce osed) Ce	0.00 Filing Fertificate of ertified Copylditional copy	Status & y	

MAILING ADDRESS:

TO:

Registration Section

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

Riverside Heights, LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on  $\frac{12/16/2010}{}$ \_\_ and assigned Florida document number \_L10000128753 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 contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC 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 \_. Florida \_\_\_ City

### 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 605, 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 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
AREP	Charles Harper	100 N TAMPA ST STE 2700 Tampa, FL 33602	
			■ Remove
			☐ Change
<del></del>	<del>.</del>		□ Add
		<del></del>	□ Remove
			☐ Change
			Add- or
			≥□ Remove
			☐ Change
	**************************************		Add
		<del></del>	☐ Remove
			□ Change
	<del></del>		
			Remove
			Change
			🖸 Add
			Remove
			Change

	,				_
		<del></del> -			
<del> </del>					
	<del> </del>				_ <del>_</del>
					<del></del>
· · · · · · · · · · · · · · · · · · ·			<del></del>	- ت	
			<del>-</del>	15-4	
			-	- <u>-</u>	
			٠.		
	-				
				<del></del>	
ective date, if other than the date of filing:		(opti	onal)		
reffective date is listed, the date must be specific and cannot be prior to date te: If the date inserted in this block does not meet the applicable st		90 days after	filing.)		
cument's effective date on the Department of State's records.	, , ,				
record specifies a delayed effective date, but not an $\epsilon$ he 90th day after the record is filed.	effective time, a	et 12:01 a	a.m. o	n the ea	arlier
06/04/2019					
$\sim \Lambda\Lambda$					

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00