11/000063993

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

Registration Section

Division of Corporations

TO:

| SUBJECT: | Riviera Pawnbrokers & Estate Buyers, L.L.C. | | | | | | | |
|--------------------|---|--|--|---------------------|-------------|-------|--|--|
| SUBSECT. | | Name of Lim | ited Liability Company | | | | | |
| The enclosed | d Articles of | Amendment and fee(s) are sub | mitted for filing. | | | | | |
| Please return | all correspo | ondence concerning this matter | to the following: | | | | | |
| | Jerald C. Cantor | | | | | | | |
| | | | Name of Person | | | | | |
| | | Phillips, Cantor &Shalek, | P.A. | | | | | |
| | | | Firm/Company | | | | | |
| | | 4000 Hollywood Blvd., St | nite 500 N | TALL | 2017 AUG | | | |
| | | | Address | AHC | NV. | | | |
| | | Hollywood, FL 33021 | | AHASSE | , i | FILED | | |
| | City/State and Zip Code | | | | | | | |
| | | jcantor@phillipslawyers.co | | iffication) | <u>.</u> છ | | | |
| For further i | nformation c | E-mail address: (oncerning this matter, please c | to be used for future annual report not | inication) | 91 SIG | | | |
| | | oncerning this matter, prease e | | | | | | |
| Jerald C. Ca | | | 954 966-1820 at () | | | | | |
| | Name o | f Person | Area Code Daytin | ne Telephone Number | | | | |
| Enclosed is | a check for tl | ne following amount: | | | | | | |
| ■ \$25.00 l | Filing Fee | □ \$30.00 Filing Fee & Certificate of Status | □ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) | Certified | e of Status | | | |
| | Registi Divisio P.O. B | ING ADDRESS: ration Section on of Corporations ox 6327 assee, FL 32314 | STREET/COUR Registration Secti Division of Corpo Clifton Building 2661 Executive C | orations | | | | |

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) and assigned Florida document number __ L11000063993 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 "L.L.C." 8348 W. State Road 84 Enter new principal offices address, if applicable: Davie, FL 33324 (Principal office address MUST BE A STREET ADDRESS) PO Box 802204 Enter new mailing address, if applicable: Miami, FL 33280 (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: U Ÿ Phillips, Cantor & Shalek, P.A. Name of New Registered Agent: σ 4000 Hollywood Blvd., Suite 500 N New Registered Office Address: Enter Florida street address , Florida ³³⁰²¹ Hollywood

New Registered Agent's Signature, if changing Registered Agent:

Riviera Pawnbrokers & Estate Buyers, L.L.C.

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

Zip Code

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 | Edward Dikes | 1326 SE 3rd Ave. | □ Add |
| | | Fort Lauderdale, FL 33316 | ■ Remove |
| | | 8348 W. State Road 84 | ☐ Change |
| MGRM | Oded Wolf | Davie, FL 33324 | Add |
| | | | □ Remove |
| | | 8348 W. State Road 84 | |
| MGRM | Ruth Wolf | Davie, FL 33324 | ■ Add |
| | | | ALL AND Remove |
| | | | SSEE SCHAIR |
| | | | DF SIMIL SEPTION |
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| | nending any other information, enter change(s) here: (Attack | n additional sneets, if necessary.) |
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| (If an eff | ctive date, if other than the date of filing: effective date is listed, the date must be specific and cannot be prior to date of fee: If the date inserted in this block does not meet the applicable status ument's effective date on the Department of State's records. | (optional) filing or more than 90 days after filing.) Pursuant to 605.0207 (2 tory filing requirements, this date will not be listed as the |
| | record specifies a delayed effective date, but not an effe ne 90th day after the record is filed. | ective time, at 12:01 a.m. on the earlier of: |
| Dated | ed August , 2017 . | |
| | | |
| | Signature of a member or authorized repre | esentative of a member |
| | / 1 / // | |

Page 3 of 3

Filing Fee: \$25.00