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T. HAMPTON

COVER LETTER

TO: Registration Section Division of Corporations Rivers Edge Realty, 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 matter to the following: Robert G. Thornton Name of Person Rivers Edge Realty, LLC 608 E. Old Mill Drive Address DeBary, FL 32713 City/State and Zip Code rgthornton@earthlink.net E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Robert G. Thornton STREET/COURIER ADDRESS: MAILING ADDRESS: Registration Section Registration Section Division of Corporations Division of Corporations Clifton Building P.O. Box 6327 Tallahassee, Florida 32314 2661 Executive Center Circle Tallahassee, Florida 32301

□ \$55 Filing Fee & Certified Copy

□ \$25 Filing Fee

Enclosed is a check for the following amount:

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

Pursuant to the provisions of sections 608.416 or 608.508, 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.

1. Na	me of the limited liability company: Rivers Edge Realty, LLC	;	
2. (a)	Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)	608 E. Old Mill Drive DeBary, FL 32713	
(b)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	PO Box 530730 DeBary, FL 32753	
05/18/20		L12000067436	
3. Da	te of filing/registration in Florida	4. Document number	
5. (a)	Registered Agent and Registered Office shown on t	he records of the Florida Dept. o	of State:
	Registered Agent:	SLUTSKY, ERWIN H	
	Registered Office Address:	604 N. VOLUSIA SVENUE ORANGE CITY FL 32763 US	
(b)	Enter name of NEW Registered Agent and/or NEV	V Registered Office address:	
	NEW Registered Agent:	SLUTSKY, ERWIN H.	
	NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	5 W. Highbanks Road	
		DeBary,	FL_32713
confir and the liabili the mo the op Signatur	limited liability company is not organized under the lamed that after the change or changes are made, the Flate business office of the registered agent will be identity company, it is hereby confirmed that the change(s) embers of the limited liability company or as otherwise perating agreement of the limited liability company. The orangement of the limited liability company. The orangement of the limited liability company.	orida street address of the registorical. Or, in the case of a Florida was/were authorized by an affir	ered office limited 🗐 mative vote:of
I here compl and I Chapi addre	or typed name of signee by accept the appointment as registered agent and a ly with the provisions of all statutes relative to the pro am familiar with and accept the obligations of my po- ter 608, F.S. Or, if this document is being filed to mel ss, I hereby confirm that the limited liability company boundary	gree to act in this capacity. I fur oper and complete performance sition as registered agent as pro rely reflect a change in the regis has been notified in writing of i	

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00