

L1300000 4111

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

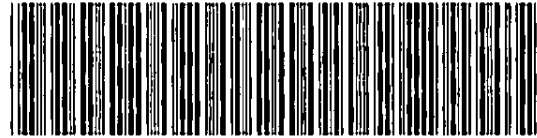
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700323906957

02/26/19--01005--021 **25.00

RECEIVED

FEB 25 2019

FILED

2019 FEB 26 PM 2:41

GEORGIA STATE
TALLAHASSEE, FL

R. WHITE
MAR 01 2019

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: RIVERSIDE ALTERNATORS & STARTERS, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

DAVID A. NETBURN

Name of Person

ROLNICK & NETBURN

Firm/Company

5521 N. University Drive, Suite 204

Address

Coral Springs, Florida 33067

City/State and Zip Code

penka@mountainpowerinc.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

David A. Netburn

954

346-5001

at (_____) _____

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$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

2019 FEB 26 PM 2:41

RIVERSIDE ALTERNATORS & STARTERS, 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 1/8/13 and assigned
Florida document number 113000004111.

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."

Enter new principal offices address, if applicable:

5001 NW 13th Avenue, Suite N

(Principal office address MUST BE A STREET ADDRESS)

Deerfield Beach, Florida 33064

Enter new mailing address, if applicable:

5001 NW 13 Avenue, Suite N

(Mailing address MAY BE A POST OFFICE BOX)

Deerfield Beach, Florida 33064

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

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 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>	<u>Address</u>	<u>Type of Action</u>
CEO	James M. Ferrari		<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
		500 NW 13th Avenue, Suite N	<input checked="" type="checkbox"/> Change
		Deerfield Beach, FL 33064	
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

[illegible]

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated January 29th 2019

Signature of a member or authorized representative of a member

Typed or printed name of signee