# L/30000/8242

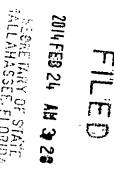
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# **COVER LETTER**

TO: Registration S Division of Co					
Rive	rside Electric S	South LLC			
SUBJECT:		ted Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return all correspondent	ondence concerning this matter	to the following:			
	John D Wilse	on			
		Name of Person			
	<del> </del>	Firm/Company			
	9062 Symme	es View Ct			
		Address			
	Loveland Of	1 45140		20 I t	
		City/State and Zip Code	TAKE A	2014 FEB 24	
	jwilson@scroggir		AS	<u>~</u>	
	E-mail address: (t	o be used for future annual report not	ification)		1 ?'''}
For further information of	concerning this matter, please c	all:	1 C	) <del>-</del> EE	ا ا
John D Wil	son	513 <b>325-06</b>	648 RA	3€ 2€	*****
Name o	of Person		ne Telephone Number	<del></del>	
Enclosed is a check for t	he following amount:			•	
■ \$25.00 Filing Fee	□\$30.00 Filing Fee & Certificate of Status	□\$55.00 Filing Fee & Certified Copy	□\$60.00 Filing Fee, Certificate of Statu	s &	

### MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

### STREET/COURIER ADDRESS:

Certified Copy

(additional copy is enclosed)

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

(additional copy is enclosed)

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Riverside Electric South LLC		
(Name of the Limited Liabili (A Florida	ity Company as it now appears of a Limited Liability Company)	on our records.)
The Articles of Organization for this Limited Liability Florida document number L13000018242	Company were filed on Febru	uary 5, 2013 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the li	mited liability company here:	
Riverside Electric South Florida LLC		
The new name must be distinguishable and end with the w "L.L.C."	ords "Limited Liability Company	"the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADI	DRESS)	
		AAR RE T
		24 SSE
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)	<del> </del>	<u> </u>
		₩ <b>2</b>
B. If amending the registered agent and/or regregistered agent and/or the new registered office ad  Name of New Registered Agent:  New Registered Office Address:	ldress here:	records, enter the name of the new
	Enter	
	City	, Florida Zip Code
	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 608, 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 amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records: MGR = Manager MGRM = Managing Member <u>Title</u> <u>Name</u> **Address Type of Action** 

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If amending any other information	on, enter change(s) here: (Attach additional sheets	s, if necessary.)
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February 19	<u>2014</u> .	
	Dul-	
	ature of a member or authorized representative of a mem	ıber
John D Wilson	Typed or printed name of signee	
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