## 113000/45254

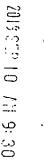
(Requestor's Name)
(Address)
(Address)
,
(City/State/Zip/Phone #)
(Only/State/Epp: Hone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

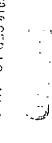
Office Use Only



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## **COVER LETTER**

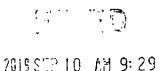
	gistration Sec vision of Corp				
SHD IFCT.		VE LANDINGS 430, LLC			
SUBJECT:		Name of Limi	ted Liability Company		
The enclose	d Articles of A	Amendment and fee(s) are subr	nitted for filing.		
Please return	n all correspor	ndence concerning this matter t	o the following:		
		PAM MCKINNEY CPA			
		SUMMIT QUEST INC	Name of Person		
		3433 E GULF TO LAKE H	Firm/Company		
		INVERNESS, FL 34453	Address		
		PAMMCKINNEYUS@GM	City/State and Zip Code AIL.COM		
		E-mail address: (t	o be used for future annual rep	ort notification)	
For further i	nformation co	ncerning this matter, please ca	H:		
PAM MCK	INNEY		352 584-1	498	
	Name of	Person	Area Code	Daytime Telephone Number	
Enclosed is	a check for the	e following amount:			
\$25.00 1	Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclose	ed) Certified	e of Status &

MAILING ADDRESS: Registration Section

Division of Corporations P.O. Box 6327

STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



RIVER COVE LANDINGS 430, LLC

(Name of the Limited Liability Company as it now appears on our records	$\neg$
TINUITIE DI TRE L'AMITER L'ABBAITY L'AMBARY AT IL DOM ABRESTE AR OUT TECRTAS	. 1
Control of the contro	_
(A Florida Limited Liability Company)	_

	(A Florida Limited	Cisolity Company)			
The Articles of Organization for this Limited L Florida document number L13000145254	iability Company	were filed on 10/15/	and assigned		
Tiorida document number	· · · · · · · · · · · · · · · · · · ·				
This amendment is submitted to amend the foll	owing:				
A. If amending name, enter the new name o	f the limited liab	oility company here:			
The new name must be distinguishable and contain the v	vords "Limited Liabi	ility Company," the desig	nation "LLC" or the abbreviation "L.L.C."		
Enter new principal offices address, if applic	able:	C/O ANTONIUS VAN USEN			
(Principal office address MUST BE A STREE		5085 E ROSEHILL DR			
		FLORAL CITY, FL	34436		
Enter new mailing address, if applicable:		C/O AGNES W.M. REULEN, LLC			
(Mailing address MAY BE A POST OFFICE	FLORAL CITY, FL 34436  C/O AGNES W.M. REULEN, LLC				
	<del>.</del>	HERNANDO, FL	14441		
B. If amending the registered agent and registered agent and/or the new registered of Name of New Registered Agent:	or registered of the first of t	1A, PA	r records, <u>enter the name of the ne</u>		
New Registered Office Address:	DILLAR	Enter Florida	street address		
	WINTER GAR	,,	, Florida <sup>34787</sup>		
		City	Zip Code		
Now Dogistared Aponto-Cianature (C.L	3				

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
MGR	PETRUS I GROENENDIJK	PO BOX 1089	
		INTERCESSION CITY, FL	Add
		33848	■ Remove
			Change
MGRM	DHAEZE USA INC	C/O AGNES W.M. REULEN LLC	
		PO BOX 1236	
		HERNANDO, FL 34441	Remove
			■ Change
		-	
			Remove
			☐ Change
			Remove
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			Add
			Remove
			Change
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			Change

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ote: If the date	other than the dar- listed, the date must be inserted in this block ive date on the Depar	does not meet the a	pplicable statutory	or more than 90 da filing requiremen	(optional) ys after filing.) Pursu its, this date will no	ant to 605.020 of be listed ;
: record spec The 90th day	ifies a delayed ef after the record	fective date, bu l is filed.	t not an effecti	ve time, at 12	:01 a.m. on th	e earlier
		, <sup>2019</sup> -	<del>\</del>			
ated August 20		(I) 11	$\mathcal{I}_{\mathcal{N}}$ .	的外		
ated August 20		nature of a member of	authorized represent  Rewley  printed name of sign			<del></del>