

10/16/2018

16:16 Nicole Vesiljic

(FAX) 941-917-0506

P.001/004

10/16/2018

L14000329S
Division of Corporations

**Florida Department of State
Division of Corporations
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(((H18000300198 3)))



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To:

Division of Corporations
Fax Number : (850)617-6383

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Account Number : I20090000020
Phone : (941)917-0505
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**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
RIVERDORE, LLC**

Certificate of Status	0
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Page Count	04
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10/17/18 DS

Audit # (((H18000300198 3)))

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

RIVERDORE, 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 3/6/2014 effective on 3/1/2014 and assigned
Florida document number L14000038295

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:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

c/o OASMI MANAGEMENT

ATTENTION: GREGORY A. ORQUERA

16 S. ORANGE AVENUE, SARASOTA, FL 34236

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

Audit # (((H18000300198 3)))

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>
MGR	SOPHIE LE SEIGNEUR	PO BOX 14762	<input type="checkbox"/> Add
		BRADENTON, FL 34280	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	GREGORY A. ORQUEBRA	16 S. ORANGE AVENUE	<input checked="" type="checkbox"/> Add
		SARASOTA, FL 34236	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Change

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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 October 16, 2018

Typed or printed name of signee