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S. WARREN DEC 0 5 2017

COVER LETTER

TO: Registration Section Division of Corporations	
Rivershore Investments, LLC SUBJECT:	
	of Limited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Offic	e Change and fee(s) are submitted for filing.
Please return all correspondence concerning this	matter to the following:
Zully Bolanos	
Name of Person	
Amicorp Corporate Services, LLC	
. Firm/Company	
1001 Brickell Bay Drive, Suite 2908	•
Address	
Miami, FL 33131	
City/State and Zip Code	
z.bolanos@amicorp.com	
E-mail address: (to be used for future annu	al report notification)
For further information concerning this matter, p	please call:
Zully Bolanos	305 416-4730
Name of Person	Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee. Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclosed is a check for the following a	amount:
☑ \$25 Filing Fee	□ \$55 Filing Fee & Certified Copy

INHS18 (2/14)

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

Pursuant to the provisions of sections 605.0114 or 605.0116, 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: Rivershore Ir	nvestme	nts, LLC		
2.	(a)	1001 Brickell Bay Drive, Suite 2908	(b	1001 Br	rickell Bay Drive, Suite 2908	
	(4)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
		Miami, FL 33131		Miami, F	FL 33131	
		3/26/2014		L140000	50196	
3.		Date of filing/registration in Florida	4.		Document number	
5.	(a)	Amicorp Fiduciary Services, LLC				
	(4)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:				
		1001 Brickell Bay Drive, Suite 2908				
		Registered Office Address (MUST BE FLORIDA STREET	-			
					58 1	
		Miami, FI	_33131		DEC T	
	(b)	Amicorp Corporate Services, LLC			EXSEL PLE	
	. ,	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	d Agent and/or NEW Registered Office address:		Eq. 3	
		1001 Brickell Bay Drive, Suite 2908			PHIZ: 54 OF STATE EE, FLORIDA	
		NEW Registered Office Address:			- 1	
		BA ::	00404		-	
		Miami FI	L <mark>33131</mark>		_	
the age wa	e cha ent v s/we	imited liability company is not organized under the launge or changes are made, the Florida street address o will be identical. Or, in the case of a Florida limited lere authorized by an affirmative vote of the members icles of organization or the operating agreement of the	of the regist iability co of the lime imited l	stered office ompany, it i ited liabilit iability con	e and the business office of the registered s hereby confirmed that the change(s) sy company or as otherwise provided in inpany.	
Signature of a member or authorized representative of a member			micorp US Director Services, LLC			
IV prothe to not	nere ovisi obl mere tifjed	by accept the appointment as registered agent and agins of all statutes relative to the proper and complete igations of my position as registered agent as provide by reflect a change in the registered office address, I din writing of this change.	ree to act e perform ed for in (' hereby co	in this cap ance of my Chapter 602 onfirm that	Printed or typed name of signee pacity. I further agree to comply with the duties, and I am familiar with and accep 5, F.S. Or, if this document is being filed the limited liability company has been	