L14000075447

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	e#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	ocument Number)	
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2015 MAY 28 PH 4: 45

G. HARVEY

EXAMINER

COVER LETTER .

TO:	Registration Se Division of Cor	ction porations				
CHD IE		DINGS LLC				
SUBJE	CI:	Name of Lim	ited Liability Company			
The end	closed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please 1	return all correspo	ndence concerning this matter	to the following:			
		GRATSIANI, GIDEON N	мG			
			Name of Person		•	
		RIGA HOLDINGS LLC				
			Firm/Company		•	
		P O BOX 820				
			Address		~	
		HALLANDALE, FL 330	08		2015 HAY 25 DECRETARY TALLAHASS	ef-
			City/State and Zip Code		新型 A 2	
		DA@FST26.COM	to be used for future annual report notif	ication)	SER M	1
For furt	ther information co	oncerning this matter, please c	•	icuron,	PH 4: 45	C
DANIE	EL ARKUSH		954 393-1151 at ()		5	,
	Name of	f Person		Telephone Number	 	
Enclose	ed is a check for th	ne following amount:				
□ \$25	5.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	te of Status &	

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

RIGA HOLDINGS LLC			
(Name of the Limit	ed Liability Compa (A Florida Limited I	ny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Li Florida document number L14000075447	ability Company	were filed on 05/08/2014	and assigned
This amendment is submitted to amend the follo	owing:		
A. If amending name, enter the new name of	f the limited liab	ility company here:	
The new name must be distinguishable and contain the w	ords "Limited Liabil		
Enter new principal offices address, if applic	able:	975 NORTH MIAMI BEACH BL	√D #234
(Principal office address MUST BE A STREE	T ADDRESS)	NORTH MIAMI BEACH , FL 331	162
			<u> </u>
Enter new mailing address, if applicable:		P O BOX 820	2015 F
(Mailing address MAY BE A POST OFFICE)	BOX)	HALLANDALE, FL 33008	
			S 72 64
B. If amending the registered agent and/ registered agent and/or the new registered of	or registered of	ffice address on our records, e	
registered agent and/or the new registered of	nice address ner	<u>r</u> .	基品 5
Name of New Registered Agent:			
New Registered Office Address:	975 NORTH M	1IAMI BEACH BLVD #234	
		Enter Florida street address	
	NORTH MIAN	MIBEACH	33162

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.

City

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 = M $AMBR = A$	lanager uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add
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Filing Fee: \$25.00