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	(Business Entity Name)
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Special Instructions	s to Filing Officer:
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## **COVER LETTER**

TO:	Registration Se Division of Cor			
SUBJE		RIVER PROPERTIES LLC	•	
30031.	Ç1	Name of Lim	ited Liability Company	
The encl	losed Articles of .	Amendment and fee(s) are sub	mitted for filing.	
Please re	eturn all correspo	ndence concerning this matter	to the following:	
		Richard Doviak		
			Name of Person	
			Firm/Company	
		568 Bosphorous Ave		
			Address	
		Tampa, FL 33606		
			City/State and Zip Code	
		E-mail address: (	to be used for future annual report not	ification)
For furth	ner information co	oncerning this matter, please c	all:	
RIC	MALD Do	VIAK	at (863) 325-	5886
	Name o	f Person	Area Code Daytin	ne Telephone Number
Enclosed	d is a check for th	ne following amount:		
Š <b>2 \$</b> 25	.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Addres Registration S		Street Address: Registration Se	ection

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BASENJI RIVER PROPERTIES LLC		
( <u>Name of the Limited Liability Comp</u> (A Florida Limited	pany as it now appears on our records I Liability Company)	
The Articles of Organization for this Limited Liability Compan Florida document number L15000045561	y were filed on 03/12/2015	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	bility company here:	
The new name must be distinguishable and contain the words "Limited Liab	pility 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)		2028 Shipe T/A
-		
		N 1000
Enter new mailing address, if applicable:		$\omega$ $\omega$
(Mailing address MAY BE A POST OFFICE BOX)		(1) 12 13 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
		THE CONTRACTOR OF THE CONTRACT
		N
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>enter t</u>	the name of the new registere
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
		rida
	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

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
AMBR	Ginger King	7273 S. Indian River Dr.	<b>=</b> Add
		Ft. Pierce, FL 34982	□Remove
			Change
			□Remove
			Change
			Remove
			□ Change
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ted	uary 6	//	1/	2020						
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	<i>-</i>	/A/ / Signe	ature of a p	nember or a	uthorized res	resentative of	a member			
		// Sign:	ature of a n	nember or a	uthorized rep	resentative of	a member			

Filing Fee: \$25.00