(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
special Instructions to Filing Officer: Spoke to Michael Rivera who gave permission to any list him as the Registered Agent.						

Office Use Only



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**B FIGUEROA** MAR 2 0 2018

TO:	Registration Section Division of Corporations		,				
SURI	ECT:	Rich River Prop	perties LLC				
5010		Name of Limited Liability Company					
Dear !	Sir or Madam:						
The e	nclosed Registered Agent/Registered Or	ffice Change and fe	ee(s) are submitted for filing.				
Please	e return all correspondence concerning t	this matter to the fo	ollowing:				
Mich	ael R. Rivera						
	Name of Person		•				
Rich	River Properties LLC						
	Firm/Company		_				
1220	3 Magnolia Blvd, Apt. 212						
	Address		_				
N. H	ollywood, CA 91607						
	City/State and Zip Code		_				
richri	verllc@gmail.com						
j	E-mail address: (to be used for future ar	unual report notific	ation)				
For fu	urther information concerning this matte	r, please call:					
Mich	ael R. Rivera	310 at (	994-1229				
1	Name of Person	<del></del>	Area Code & Daytime Telephone Number				
	STREET/COURIER ADDRESS:	M.A.I	ILING ADDRESS:				
	Registration Section	_	Registration Section				
	Division of Corporations		Division of Corporations				
	Clifton Building		P.O. Box 6327				
	2661 Executive Center Circle Tallahassee, Florida 32301	Talla	ahassee, Florida 32314				
	Enclosed is a check for the followin	sed is a check for the following amount:					
	☑ \$25 Filing Fee	<b>□</b> \$55	Filing Fee & Certified Copy				
	,						

INHS18 (2/14)

TO:

## •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. N	ame of the limited liability company: Rich R	iver Pr	operties LL	.C		
2. (a)	221 Sonoma Valley Circle		(b) 12203 Magnolia Blvd. #212  Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)			
z. (4)						
	Orlando, FL 32835	<del></del>	N. Hollywood, CA 91607			
	3/16/2018		L160000	56154		
3.	Date of filing/registration in Florida	<b>4</b> .		Document number		
5. (a)	Susan C. Hendrich					
(=)	Registered Agent and Registered Office shown on the records o	f the Flor	ida Dept. of Stat	 le:		
	221 Sonoma Valley Circle, Orlando, FL 32835					
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)					
				<del>_</del>		
	. <b>F</b>	L				
	'			-	18 18	
(b)			<del>-</del>	SECRETO VISION OF NAR		
	Enter name of NEW Registered Agent and/or NEW Registere	d Office	address:		R 19	
	221 Sonoma Valley Circle				9 000	
	NEW Registered Office Address:			_	OF STATE OF	
		<del></del>	<del>- ,,                                  </del>	_	2 8	
	Orlando	L 3283	5			
the chargent vas/was/was/was/was/was/was/was/was/was/w	imited liability company is not organized under the large or changes are made, the Florida street address of 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 member of a member	of the re liability of the l e limite	gistered offic company, it i imited liabilit	te and the business of its hereby confirmed by company or as other mpany.	office of the registere that the change(s) herwise provided in	
provisi the obli to mer notifie	by accept the appointment as registered agent and agions of all statutes relative to the proper and complete ligations of my position as registered agent as providely reflect a change in the registered office address, if	e perfor led for it	mance of my n Chapter 60:	duties, ånd I am fan 5. F.S. Or. if this do	niliar with and accep cument is being filed	
Signatu	re of Registered Agent					