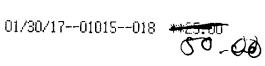
## 116000201578

(Re	questor's Name)	· <u>.</u>
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PICK-UP	WAIT	MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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S Warren JAN 31 2017

## **COVER LETTER**

Division of Cou	rporations OCK WATERFRONTS 1, LLC		
SUBJECT:		ited Liability Company	<del></del>
The enclosed Articles of	`Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	RANDOLPH C. ROCKS		
	· · ·	Name of Person	
		Firm/Company	
	38-A Alice Avenie		
		Address	<u> </u>
	Jensen Beach, FL 34957		
		City/State and Zip Code	
	randy@rocksfinancialgroup		
	E-mail address: (	to be used for future annual report notifi	cation)
For further information of	concerning this matter, please c	all:	
RANDOLPH C. ROCK	s	772 215-5232 at (	
Name o	of Person		Telephone Number
Enclosed is a check for t	he following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 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)
3.4 A TI	INC ADDDESS.	can real to the	FB ADDDECC.

MAILING ADDRESS:

TO:

**Registration Section** 

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURTER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

RIVER ROCK WATERFRONTS 1, LI	
( <u>Name of the Limited L</u> (A F	Liability Company as it now appears on our records.) Florida Limited Liability Company)
The Articles of Organization for this Limited Liabil	
Florida document number L16000201578	································
This amendment is submitted to amend the following	ng:
A. If amending name, enter the new name of the	e limited liability company here:
RIVER ROCKS WATERFRONTS 1, LLC	
The new name must be distinguishable and contain the words	s "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable	e:
(Principal office address MUST BE A STREET A	ADDRESS)
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BO.	<u></u>
	registered office address on our records, enter the name of the ne
registered agent and/or the new registered office	e address here:
Name of New Registered Agent:	
Name Descriptional Office Address	
New Registered Office Address:	Enter Florida street address
-	, Florida

## 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

Page 1 of 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 = M $AMBR = A$	anager uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add
			Remove
			☐ Change
			□ Add
			□ Remove
			Change
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			☐ Change
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			🗖 Remove
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	uing any other information	n, enter change(s) here: (Attach addit	onai znezio, y nezessaryy	
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n effec <u>te:</u> If	e date, if other than the da tive date is listed, the date must be the date inserted in this block at's effective date on the Depa	specific and cannot be prior to date of filing or does not meet the applicable statutory fili	(optional) more than 90 days after filing.) Pursuant to ng requirements, this date will not be	o 605.0 : listed
	rd specifies a delayed e Oth day after the record	fective date, but not an effective I is filed.	tlme, at 12:01 a.m. on the e	arlier
ted	Jano	, 2017		
		6/2		
	Sig	natice of a member of authorized representative		_
	Randolph C. Rocks			77
		Typed or printed name of signee		
		Page 3 of 3	יים אינויים אי יים אינויים אי	m
		1 460 5 01 5	# # # # # # # # # # # # # # # # # # #	