

Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Email Address:

Account Name

: CORPORATE CREATIONS INTERNATIONAL INC.

Account Number : 110432003053

: (561)694-8107

Fax Number

: (561)694-1639

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN 125 RIV LLC Certificate of Status

Certified Copy 0 04 age Count Estimated Charge \$30.00

Electronic Filing Menu

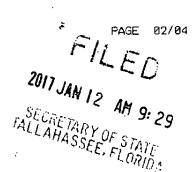
Corporate Filing Menu

Help

K. SALY

JAN 13 2017

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



125 RIV LLC

(Name of the Limi	ted Liability Comps (A Florida Limited	my as it now appears Liability Company)	on our records.)	
The Articles of Organization for this Limited L. Florida document number L17000002170	iability Company	were filed on 01/0	05/2017 and assigned	
This amendment is submitted to amend the foll	owing:			
A. If amending name, enter the new name o	f the limited liab	ility company her	<u>:</u> :	
RAFEL LLC				
The new name must be distinguishable and contain the v	vords "Limited Liabi	lity Company," the de-	signation "LLC" or the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:		11380 Prosperity Farms Rd. #221E		
(Principal office address MUST BE A STREET ADDRESS)		Palm Beach Gard	lens, FL 33410	
Enter new malling address, if applicable:		11380 Prosperity	Farms Rd. #221E	
(Mailing address MAY BE A POST OFFICE BOX)		Palm Beach Gardens, FL 33410		
B. If amending the registered agent and registered agent and/or the new registered of Name of New Registered Agent: New Registered Office Address:	Corporate Crea			
The Makageten Office Address.	Enter Florida street address			
	Palm Beach Ga	urdens	, Flortda 33410	
		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

Valerie Hawk-Donohue, Special Secretary

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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

Title	<u>Name</u>	Address	Type of Action
MGR	FREEDMAN, RICHARD	11380 Prosperity Farms Rd. #221E	□ Add
		Palm Beach Gardens, FL 33410	☐ Removo
			☐ Change
MGR	FREEDMAN, ELLEN	11380 Prosperity Farms Rd. #2218	□ Add
		Palm Beach Gardens, FL 33410	□ Removo
			■ Change
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reffective date is listed, the date mus	ick does not meet the applicable statute	(optional) ling or more than 90 days after filing.) Pursuant to ory filing requirements, this date will not be	505.0207 (3)(b) listed as the
record specifies a delayed he 90th day after the reco	effective date, but not an effeord is filed.	ective time, at 12:01 a.m. on the ea	ırlier of:
ed January 12th	2017		
value	Signature of a mumber or authorized repres	scniative of a member	-
	•		

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Filing Fee: \$25.00