

L17900154290

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

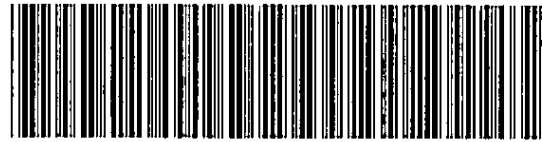
(Business Entity Name)

(Document Number)

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2023 MAR 24 PM 2:50



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 6, 2023

MARISOL RODRIGUEZ
5230 S. ORANGE AVE
ORLANDO, FL 32809

SUBJECT: RIVER CRAFT LLC
Ref. Number: L17000154290

2023 MAR 24 PM 2:50

We have received your document for RIVER CRAFT LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a REGISTERED AGENT CHANGE FOR A CORPORATION, but your entity is a LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Alecia Rivers
Regulatory Specialist II

Letter Number: 323A00005189

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: RIVER CRAFT LLC
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

MARISOL RODRIGUEZ

Name of Person

RIVER CRAFT LLC

Firm/Company

5230 S ORANGE AVE

Address

ORLANDO, FL 32809

City/State and Zip Code

MRODRIGUEZ@RIVERCRAFTLLC.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MARISOL RODRIGUEZ

Name of Person

at (407) 450-4325

Area Code & Daytime Telephone Number

Mailing Address:

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

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Enclosed is a check for the following amount:

☐ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

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**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. Name of the limited liability company: RIVER CRAFT LLC

2. (a) 5230 S ORANGE AVE ORLANDO, FL 32809
Principal office address of limited liability company
(Note: MUST BE STREET ADDRESS)

(b) _____
Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)

3. 3/21/23 Date of filing/registration in Florida

4. L17000154290 Document number

5. (a) MARISOL RODRIGUEZ
Registered Agent and Registered Office shown on the records of the Florida Dept. of State

2148 ORINOCO DR
Registered Office Address (Note: MUST BE FLORIDA STREET ADDRESS)
SUITE 356
ORLANDO, FL 32837

(b) LUIS D. RIVERA
Enter name of NEW Registered Agent and/or NEW Registered Office address:

NEW Registered Office Address:
5230 S ORANGE AVE
ORLANDO, FL 32809

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Luis D. Rivera

Signature of a member or authorized representative of a member

LUIS D. RIVERA

Printed or typed name of signee

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.

Luis D. Rivera

Signature of Registered Agent

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