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DIVISION OF CORPORATIONS

N COOPER MAY 2 4 2018

COVER LETTER

, Div	ision of Corp	porations				
SUBJECT:	1601 Riviera LLC					
onject.		Name of Lim	ited Liability Company			
The enclosed	l Articles of A	Amendment and fee(s) are sub	mitted for filing.			
Please return	all correspoi	ndence concerning this matter	to the following:			
		Carol Brenner				
			Name of Person			
		Intergrated Real Properties	Inc			
	9314 Forest Hill Blvd Ste 113					
			Address			
		Wellington FL 33411				
			City/State and Zip Code			
		carolbrenner377@gmail.cor				
		E-mail address: ()	to be used for future annual report notific	cation)		
For further in	nformation co	oncerning this matter, please ca	alt;			
Walter St Su	ırin		561 635.4673 at ()			
	Name of	Person	at ()	Telephone Number		
		e following amount:				
\$25.00 F	iling 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)		

MAILING ADDRESS:

Registration Section

TO:

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

STREET/COURIER ADDRESS:

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

1601 Riviera LLC				
(<u>Name of the Lim</u>	ited Liability Company (A Florida Limited Lia	as it now appears on o bility Company)	ur records.)	
The Articles of Organization for this Limited I	Liability Company w	ere filed on 2/9/2018		and assigned
This amendment is submitted to amend the fol	llowing:			
A. If amending name, enter the new name	of the limited liabili	ty company here:		
The new name must be distinguishable and contain the	words "Limited Liability	· Company," the designal	ion "LLC" or the abbi	reviation "L.1C."
Enter new principal offices address, if appli	cable:	9314 F	Hilf for	#113.
Principal office address MUST BE A STRE	<u>ET ADDRESS)</u>	Welliga	in, FC 3	3411
Enter new mailing address, if applicable:				
Mailing address MAY BE A POST OFFICE	EBOX)			
B. If amending the registered agent and registered agent and/or the new registered of		ce address on our	records, enter th	SE DIVIS 18
Name of New Registered Agent:	Carol Brenner			HAY 2
New Registered Office Address:	1144 SW 24th Av			F COR
		Enter Florida stre		F S I
	Boynton Beach		, Florida <u></u> 3342	6

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, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Demott, Daniel L. II	2411 Quantum BLVD	
		Boynton Beach FL 33426	■ Remove
			□ Change
MGR	St Surin, Walter	9314 Forest Hill Blvd Ste 113	
		Welfington FL 33411	☐ Remove
			☐ Change
MGR	Intergrated Real Properties INC	9314 Forest Hill Blvd Ste 113	∃ Add
		Wellington FL 33411	□ Remove
			Change
MGR	Brenner , Carol	9314 Forest Hill Bled Ste 113	⊟ Add
		Wellington F1, 33411	Remove
			□ Change
			□ Remove
			Change
			□ Add
			□ Remove
			□ Change

If amending any other	information, enter	change(s) he	re: (Attach add	itional sheets, if no	cessary.)	
			 			
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Effective date, if other	than the date of file the date must be specific	ing:	or to date of filing o	(op	tional) ter tiling.) Pursuant to	o 605.0207
Note: If the date inserted document's effective date				ling requirements, t	his date will not be	listed as
ne record specifies a The 90th day after			ot an effective	e time, at 12:01	a.m. on the e	arlier of
Dated May 22		2018	<u> </u>			
	Signature o	t a member or aut	horized representat	ive of a member		_
	<u> </u>		Brenne ited name of signed			

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Filing Fee: \$25.00