

48000106123

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

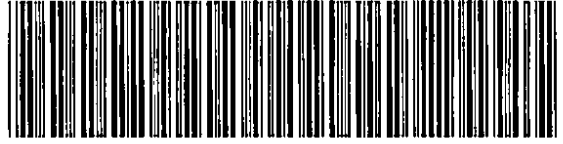
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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8-31-18

FILED
2018 AUG 31 AM 9:42
SECRETARY OF STATE
TALLAHASSEE, FL

*Waiting form
am*

*9-6-18
UHS*



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 28, 2018

NICOLE ASHER BRATON
12555 BISCAYNE BLVD #417
MIAMI, FL 33181 US

SUBJECT: RILEY 17, LLC
Ref. Number: L18000106123

We have received your document for RILEY 17, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

YOU CAN ONLY CHANGE THE REGISTERED AGENT INFO ON THIS FORM. WE ARE ENCLOSING THE PROPER FORM TO UPDATE THE AUTHORIZED PERSON DETAIL. PLEASE..FIND THE PRINTOUT OF THE LLC INFORMATION FROM SUNBIZ.ORG. I HAVE HIGHLIGHTED WITH YELLOW AND PINK, WHAT YOU CAN BE UPDATED ON EACH FORM.

Please return the corrected original and one copy of 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) 245-6051.

Janeice L Smith
Regulatory Specialist II
Registration Section

Letter Number: 618A00017722

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Riley 17 LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Nicole Asher Braxton
Name of Person
Riley 17 LLC
Firm/Company
12555 Biscayne Blvd, #417
Address
Miami, FL 33181
City/State and Zip Code
properiya@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Nicole Asher Braxton at (954) 325-1340
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the 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)
- Already sent & cashed

MAILING ADDRESS:
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

2018 AUG 31 AM 10:55
OFFICE



**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Riley 17 LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 4/27/18 and assigned Florida document number L18000106123.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

City

Florida

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

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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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
Mrs	Charyn Pedram	12555 NE Biscayne Blvd, #417, Miami, FL 33181	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
Mr.	William Jason Braxton (Secretary)	12555 NE Biscayne Blvd, #417, Miami, FL 33181	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change

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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

William Jason Braxton to be listed as Secretary.

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E. Effective date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:
(b) The 90th day after the record is filed.

Dated August 29, 2018

Nicole Asher Braxton
Signature of a member or authorized representative of a member

Nicole Asher Braxton
Typed or printed name of signee