L18000 137 777

(Requestor's Name)						
(Address)						
(Address)						
(City/S	tate/Zip/Phone	· #)				
PICK-UP	WAIT	MAIL				
(Business Entity Name)						
(Document Number)						
Certified Copies	Certificates	of Status				
Special Instructions to Filing Officer:						
		1				

Office Use Only



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M 50 Killiger

COVER LETTER

TO:

INHS18 (2/14)

Registration Section

Divis	sion of Corporations					
SUBJECT:	River Reach 2-209, LLC					
	Name of Limited Liability Company					
Dear Sir or M	fadam:					
The enclosed	Registered Agent/Registered Office	Change and fee(s) are submitted for filing.			
Please return	all correspondence concerning this n	natter to the follo	wing:			
Wilson Kı	ulkamp					
	Name of Person					
River Re	ach 2-209, LLC					
	Firm/Company	· = · · · · · · · · · · · · · · · · · ·				
2607 NE	8th Avenue, Apt 61					
	Address					
Wilton Ma	anors, Florida 33334					
	City/State and Zip Code	7-				
WilsonKu	lkamp@gmail.com					
E-mail a	address: (to be used for future annual	report notification	on)			
For further in	formation concerning this matter, ple	ase call:				
Wilson Ku		312	536-8564			
	Name of Person	Λr	ea Code & Daytime Telephone Number			
Registration SectionRegDivision of CorporationsDivClifton BuildingP.C		Registra Divisio P.O. Bo	NG ADDRESS: ation Section n of Corporations ox 6327 ssee, Florida 32314			
Enclosed is a check for the following amount:						
☑ \$2	5 Filing Fee	□ \$55 Fi	ling Fee & Certified Copy			

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.	Na	me of the limited liability company:	River Reach	2-209,	LLC	 		
2. (a	a)			(b)	1			
Ì		Principal office address of limited liab (Note: MUST BE STREET A)	bility company:		;	Mailing address of limit (Note: MAY BE PO)		
		2607 NE 8th Avenue, Apt 61			2607 N	E 8th Avenue, A	pt 61	
		Wilton Manors, FL 33334			Wilton I	Manors, FL 3333	34	
		June 4, 2018			L18000	137777		
3.		Date of filing/registration in	Florida	4.		Document number	i	
5. (a)	Wilson Kulkamp						
()		Registered Agent and Registered Office show	n on the records of t	he Florida	Dept. of State	- e:		
		Registered Office Address (MUST BE FL	ORIDA STREET A	DDRESS)		_		
		1000 River Reach Drive, #209)				o ~	
		Fort Lauderdale	, FL	33315		TALL	2019 JUL 22 Seperation	T
(b)	o)	Wilson Kulkamp				AHAS	L 22	ر حصص
		Enter name of NEW Registered Agent and/o	r <u>NEW Registered</u>	Office add	ress:	LLAHASSEE, FI	PM 4:2	
		NEW Registered Office Address:		<u> </u>		- ' -	22	
		2607 NE 8th Avenue, Apt 61				-		
		Wilton Manors	, FL	33334		_		
the cagen	t w we rti	mited liability company is not organizenge or changes are made, the Florida still be identical. Or, in the case of a Fre authorized by an affirmative vote of the operating a	street address of lorida limited lia of the members of greement of the	the regist ability conf the limi limited li	tered office npany, it i ted liabilit	e and the business of shereby confirmed by company or as other than the company.	office of that the nerwise	the registered change(s) provided in
_	/	use of a member or authorized representative of				Printed or typed name	-	
prov the o to m	isio bli ere	ny accept the appointment as registere ons of all statutes relative to the proper igations of my position as registered a ly reflect a change in the registered of in writing of this change.	er and complete _i igent as provided	performa d for in C	nce of my hapter 605	duties, ånd I am fan 5. F.SOr. if this do	niliar w. Scument	ith and accept is being filed
Sign	atur	e of Registered Agent	7					

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