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## **COVER LETTER**

	Registration Sec Division of Corp			
SURIFC"		CKED GIN, LLC		
.5(7)317(2	··	Name of Lim	ited Liability Company	
The enclo	sed Articles of a	Amendment and fee(s) are sub	mitted for filing.	
Please ret	um all correspo	ndence concerning this matter	to the following:	
		Joseph H. Brown, Esq.		
SUBJECT:  Name of Limited Liability Company  The enclosed Articles of Amendment and fee(s) are submitted for filling.  Please return all correspondence concerning this matter to the following:  Joseph H. Brown, Esq.  Name of Person  Blount Law, PL.  Firm/Company  809 Walkerbilt Road, Suite 6  Address  Naples, FL 34110  City/State and Zip Code  jbrown@blountlaw.com  E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:  Joseph H. Brown  Name of Person  Name of Person  Daytime Telephone Number				
		Blount Law, PL		
			Firm/Company	illing. wing:  e of Person  #Company  address  r and Zip Code  or future annual report notification)  239 592-4815  Area Code Daytime Telephone Number  Do Filing Fee & S60.00 Filing Fee, tified Copy  Certificate of Status &
809 Walkerbilt Road, Suite 6				
		-	Address	<del></del>
		Naples, FL 34110		
			City/State and Zip Code	
		E-mail address: (	to be used for future annual report notifi	cation)
For furthe	r information co	oncerning this matter, please ca	all:	
Joseph H	. Brown			
	Name of	Person	Area Code Daytime	Telephone Number
Enclosed	is a check for th	e following amount:		
\$25.0	0 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

GOBSMACKED GIN, LLC		
( <u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny as it now appears on our records.) Jabihty Company)	
The Articles of Organization for this Limited Liability Company Florida document number $\frac{1.18000222766}{1.18000222766}$ .	Liability Company were filed on 09/19/2018	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
Rivigin, LLC		
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or	
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS)		<u> </u>
		3 1
Enter new mailing address, if applicable:		20 3 O
Mailing address MAY BE A POST OFFICE BOX)		
	<del></del> -	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here		enter the name of the no
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Floric	da

## 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

<u>Title</u>	<u>Name</u>	Address	Type of Action
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(If an effect <u>Note:</u> If	o9/19/2018  e date, if other than the date of filing:	filing.) Purse		
	rd specifies a delayed effective date, but not an effective time, at 12:01 a total day after the record is filed.	.m. on th	ne earli	ier of:
Dated	September 25_, 2018.			
	Signalbre of a member or authorized representative of a member			
	Joseph H. Brown Esq. Typed or printed name of signce			

Page 3 of 3

Filing Fee: \$25.00