## L18000 288158

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## COVER LETTER

TO:	Registration Section Division of Corporations		
SUBJE	RIVIERA LAW GROUP PLLC		
эовя.		une of Limited L	iability Company
Dear Si	r or Madam:		
The end	closed Registered Agent/Registered O	ffice Change and	fee(s) are submitted for filing.
Please	return all correspondence concerning t	his matter to the	following:
JOAN I	BURTON JENSEN		
	Name of Person		
SIGURI	D JENSEN CO.		
	Firm/Company		<del></del>
806 SO	UTH DOUGLAS ROAD, SUITE 580		
	Address		
CORAL	. GABLES, FLORIDA 33134		
	City/State and Zip Code		
jbj@jen	sig.com		
IS-	-mail address: (to be used for future ar	mual report notif	ication)
For furt	ther information concerning this matte	r, please call:	
JOAN I	BURTON JENSEN	305 at (	987-3199 )
	Name of Person		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	ig amount:	
	▲ \$25 Filing Fee	□ \$:	55 Filing Fee & Certified Copy
INHS18	(2/14)		

## 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. N	lame of the limited liability company: RIVIERA LA	W GROUP PI	LLC
2. (a)	·	(b	n)
·	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	806 SOUTH DOUGLAS ROAD, SUITE 580		806 SOUTH DOUGLAS ROAD, SUITE 580
	CORAL GABLES, FLORIDA 33134		CORAL GABLES, FLORIDA 33134
	DECEMBER 13, 2018	1	L18000288158
3.	Date of filing/registration in Florida	4.	Document number
5. (a	JOAN BURTON JENSEN		
., , , ,	Registered Agent and Registered Office shown on the records	s of the Florida	a Dept. of State:
	Registered Office Address (MUST BE FLORIDA STREET 800 SOUTH DOUGLAS ROAD, SUITE 300, PUERT		
	CORAL GABLES	.FL 33134	
			• •
(b)	Enter name of NEW Registered Agent and/or NEW Register		<del></del>
	Enter name of NEW Registered Agent and/or NEW Registe	ered Office add	Idress:
			<u> </u>
	NEW Registered Office Address:		<del></del>
	806 SOUTH DOUGLAS ROAD, SUITE 580		 
	CORAL GABLES	FL 33134	
chang agent was/w the at Sign Provie the old to mediate.	limited liability company is not organized under the cor changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited were authorized by an affirmative vote of the member ticles of organization or the operating agreement of the appointment as registered agent and a sions of all statutes relative to the proper and completing tions of my position as registered agent as provingly reflect a change in the registered office address, and in writing of this change.	the registere I liability corrs of the limited limited li	ed office and the business office of the registered ompany, it is hereby confirmed that the change(s) nited liability company or as otherwise provided in iability company.  N BURTON JENSEN  Printed or typed name of signce  in this capacity. I further agree to comply with the
Signal	ure of Registered Appro		