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(Requestor's Name)	Ī
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(City/State/Zip/Phone #)	÷
PICK-UP WAIT MAIL	
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Certified Copies Certificates of Status	
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Special Instructions to Filing Officer:	
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NAY 28 2019 S. YOUNG



FLORIDA DEPARTMENT OF STATE Division of Corporations

MAY 22 2019

May 15, 2019

ANTHONY G WOODWARD WOODWARD LAW GROUP 20727 STERLINGTON DRIVE LAND O LAKES, FL 34638

SUBJECT: RIKIPPERSHAY, LLC Ref. Number: L19000110223

We have received your document for RIKIPPERSHAY, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION, but your entity is a LLC. Please complete and return the enclosed blank form(s).

Please return 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) 245-6050.

Shelia H Young Regulatory Specialist II

Letter Number: 919A00009857



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Division of Corporations P.O. ROY 6327 Tallahassaa Florida 32314

COVER LETTER

TO:	Registration Section Division of Corpor		;		
SUBJE	RIKIPPERSHA	AY, L]	.C		
SUBJE			Name of Limited L	Liability Company	
			ţ		
The end	closed Articles of Am	 endmu 	ent and fee(s) are submitte	ed for filing.	
Please	return all corresponde	ence co	oncerning this matter to the	 he following: 	
		ANT	IONY G. WOODWARD		
		woo	DWARD LAW GROUP	Name of Person	
		20727	STERLINGTON DRIVE	Firm/Company	
		LAN	O O LAKES, FL 34638	Address	
	:	SOLA	@ANTHONYWOODWA		
				e used for future annual report notification)	
For fur	ther information conc	erning	this matter, please call:		
OLUS	OLA PALACIOS			813 251 2200 at ()	
	Name of Pe	erson		Area Code Daytime Telephone Number	
Enclose	ed is a check for the f	ollowi	ng amount:		
□ \$2:	5.00 Filing Fee		.00 Filing Fee & Ertificate of Status	\$55.00 Filing Fee & S60.00 Filing Fee, Certified Copy (additional copy is enclosed) \$60.00 Filing Fee, Certificate of Statu Certified Copy (additional copy is enclosed)	
	MAILING Registration Division of P.O. Box of Tallahasse	on Sector of Corp 6327	tion orations	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

RIKIPPERSHAY,JLLC				
(Name of the Limited Liabil	ity Company as it now appears on our records.) a Limited Liability Company)		_	
(7.1.10114				
The Articles of Organization for this Limited Liability (company were filed on 04/23/2019	and	assigne	:d
Florida document number L19000110223	<u> </u>			
This amendment is submitted to amend the following:				
A. If amending name, <u>enter the new name of the lim</u>	ited liability company here:			
The new name must be distinguishable and contain the words "Lir	nited Liability Company," the designation "LLC" or the al	breviation	"L.L.C.	
Enter new principal offices address, if applicable:			19	
	DECCO	-	_ 	
(Principal office address MUST BE A STREET ADD.	RESS)			
			ੋ ਹੋ	
		•		
Enter new mailing address, if applicable:			32	
(Mailing address MAY BE A POST OFFICE BOX)			. 7.5	
	· · · · · · · · · · · · · · · · · · ·	-	12	
B. If amending the registered agent and/or regi registered agent and/or the new registered office ad		tuc nai	ne or	ще_иеч
Name of New Registered Agent:	 -			
New Registered Office Address:				
	Enter Florida street address	·		-
	, Florida			
	City	Zip Ce	xte	
New Registered Agent's Signature, if changing Registere	ed Agent:			
I hereby accept the appointment as registered agent provisions of all statutes relative to the proper and accept the obligations of my position as registered a being filed to merely reflect a change in the register company has been notified in writing of this change	complete performance of my duties, and I am igent as provided for in Chapter 605, F.S. Or, ed office address, I hereby confirm that the lii	familiar if this a	with ar locumer	nd
	If Changing Registered Agent, Signature of New R	egistered 2	<u>\vent</u>	-
	Lage Lui J			

MGR = M AMBR = A	lanager authorized Member		
<u>Title</u>	<u>Name</u> Christopher Loper	Address 16400 Gulf Blvd. Unit 601,	Type of Action
MGMR		Redington Beach, FL 33708	Add
			Remove
		17400 C 1810 1 11 2 70)	Change
MGR	Patricia Lee Mason	16400 Gulf Blvd., Unit 601, Redington Beach, FL 33708	
			□ Remove
			□ Change
			Add
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D. If amending any of	ther information, enter change(s) here: (Attach additional sheets, if necessary.)
	
<u>_</u>	
E. Effective date, if ot (If an effective date is list	her than the date of filing: (optional) ted, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207
Note: If the date inse	erted in this block does not meet the applicable statutory filing requirements, this date will not be listed as
document's effective	date on the Department of State's records.
	es a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of fter the record is filed.
(b) The sourday a	rect the record is med.
Dated May 21, 2019	
Dated	
	Signature of a member or authorized representative of a member
ر فر ا	
Anthony (G. Woodward, Woodward Law Group
	Typed or printed name of signee
	Page 3 of 3
	Filing Fee: \$25.00