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PICK-UP	☐ WAIT	MAIL
(Busin	ness Entity Name)	<u> </u>
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Сепified Copies	Certificates of	Status
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Special Instructions to Fil	ling Officer:	

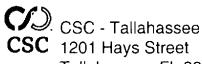
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2023 NOV -8 AM II: 53 2023 NOV -8 FH 3: 1,1



Tallahassee, FL 32301-2607 850-558-1500, Ext: 61592

To: Department Of State, Division Of Corporations

From: Alexxis Weiland-Sorenson

Ext: 61592 Date: 11/08/23 Order #: 1308397-3

Re: Rivers Edge Mobile Units LLC

Processing Method: Routine

TO WHOM IT MAY CONCERN:

Enclosed please find:

Amount to be deducted from our State Account: \$25.00 - FL State Account Number: I2000000195

Authorization:

Please take the following action:

File in your office on basis

Issue Proof of Filing

Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

COVER LETTER

TO:

Tallahassee, FL 32314

TO: Registration S Division of Co					
Rivers Edg	ge Mobile Units LLC				
SUBJECT:	Name of Lim	nited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	emitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
	Robyn Tuerk				
		Name of Person	-		
	Philips International				
		Firm/Company			
	40 Cutter Mill Road, Suite	: 405			
	Address Great Neck, New York 11021				
	Great Neck, New York 11	021			
		City/State and Zip Code			
	rtuerk@pihc.com	to be used for future annual report noti	fication		
For further information c	concerning this matter, please co		nearony		
Robyn Tuerk		212 951-3801			
Name o	of Person	at () Area Code Daytim	e Telephone Number		
Enclosed is a check for the	he following amount:				
☐ \$25.00 Filing Fee	S30.00 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)		
Mailing Address		Street Address:	otion		
Registration S Division of C		Registration Sec Division of Cor			
P.O. Box 632		The Centre of T			

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

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

FILED

Rivers Edge Mobile Units LLC

2023 NOV -8 AM 11: 53

(Name of the Limited Liability Company as (A Florida Limited Liability Company were rida document number 1.19000134089 s amendment is submitted to amend the following: If amending name, enter the new name of the limited liability new name must be distinguishable and contain the words "Limited Liability Cotter new principal offices address, if applicable: incipal office address MUST BE A STREET ADDRESS) ter new mailing address, if applicable: ailing address MAY BE A POST OFFICE BOX)	e filed on	ne 7, 2019	TALL AHA	eviation "L.L.C."
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If amending the registered agent and/or registered office add	ess on our	records, en	iter the name	of the new regis
nt and/or the new registered office address here:				
Name of New Registered Agent:				
New Registered Office Address:			<u></u>	
	Enter Flo	orida street aa	idress	
			Florida	
	City		, Florida	Zip Code

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, 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>	Address	Type of Action
MGR	Scott Massey	1701 Skees Road, Lot 1	□Add
		West Palm Beach, Florida 33411	≘Remove
			☐ Change
			□Add
			Remove
			□Change
			□Add
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Effective date, if other than the	t be specific and canno	the prior to date of fi	ling or more than 90 d	lays after filing.) P	ursuant to 605.020
Note: If the date inserted in this bidocument's effective date on the D	epartment of State's	records.	ory ming requireme	ints, this date w	in not be fisted a
e record specifies a delayed effectiv rd is filed.	e date, but not an eff	ective time, at 12:0) a.m. on the earlie	erof: (b) The S	10th day after the
N	202	n			
Dated November 8					
Kohuni	nec -				

Filing Fee: \$25.00