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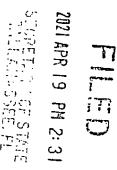
(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Special Instructions to	Filing Officer:	

Office Use Only



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COVER LETTER

TO: Registration Se Division of Cor			
SUBJECT:	River Runs	through It;	LC.
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	Pamela	Harris Name of Person	
			2021 A
		Firm/Company	PR 19
	4434 B	ndl-Water Cli	2021 APR 19 PH 2: 3
	Spring hill D. h	FL 34607 City/State and Zip Code OLYVIS 2411 QQ	mad.com
For further information co	E-ntail address: (oncerning this matter, please c	to be used for future annual report noυ all:	fication)
Pamela Name of	Harris Person	at (35a) 70 -	e Telephone Number
Enclosed is a check for th	e following amount:		
\$25.00 Filing Fee	☐ \$30.00 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 Registration S		<u>Street Address:</u> Registration Sec	ction
Division of C	orporations	Division of Cor	porations
P.O. Box 632 Tallahassee, F		The Centre of T 2415 N. Monro	allahassee e Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

A RIVER RUNS HAMLE IT, UC

(Name of the Limited Liability Company as it now appears on our records.)

(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on February 23, 21 and assigned

This amendment is submitted to amend the following:		
A. If amending name, <u>enter the new name of the limited lia</u> A RIVET Buns Hhrt	ough H Glear	
The new name must be distinguishable and contain the words "Limited Liab	oility Company." the designation "LLC" o	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	4434 Bridg	C Water
(Principal office address MUST BE A STREET ADDRESS)	Springhill, FL	34007
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	4434 Bridge	water club
B. If amending the registered agent and/or registered office	Springhill f	-L 34407 e name of the new registered
agent and/or the new registered office address here:	<u></u>	APR 19
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	्री <u>ω</u>
	, Flori	ida Zip Code

New Registered Agent's Signature, if changing Registered Agent:

Florida document number $\angle 21000089333$.

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 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>	<u>Address</u>	Type of Action
wher	Jamela Harris	4434 Bridgewater	🗀 Add
		4434 Bridgewater Club Loop Springhil, Fi	HUDT □Remove
			Change
			□Add
			□Remove
			□Change ~
		- (1, 1) - (2, 1) - (3, 1) - (4, 1) - (Z02 □ Add F PR Fringye
		ග් ඉග සුව (Tigola)	Change
		[12] [7]	□Add
			□Remove
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cument's effective date	e on the Department of	State's records.			
ecord specifies a delays	ed effective date, but no	ot an effective time, a	at 12:01 a.m. on the	earlier of: (b) The 9	Oth day after the
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—	Signature of a	Typed or printed na			