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(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	: #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
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COVER LETTER

TO:	Registration Se Division of Cor			· ·
e-1 (8) 1		nvestments LLC		
SUBJ	ECT:		ited Liability Company	
The er	nclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please	e return all correspo	ndence concerning this matter	to the following:	
		Filing Angela		
			Name of Person	
		ZenBusiness, Inc.		
			Firm/Company	
		5511 Parkerest Drive, Suit	te 103	
			Address	
		Austin, TX 78731		
		fulfillment@zenbusiness.co	City/State and Zip Code	
		E-mail address: (to be used for future annual report notit	ication)
For fu	rther information co	oncerning this matter, please co	all:	
Filing	g Angela		844 493-6249 at ()	
	Name o	f Person		: Telephone Number
Enclos	sed is a check for th	ne following amount:		
■ \$2	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 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, F1, 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

Rivergate Investments LLC		
(Name of the Limited	l Liability Company as it now appears on our records.) V Florida Limited Liability Company)	
The Articles of Organization for this Limited Lia	bility Company were filed on 05/10/2021	and assigned
lorida document number 1.21000215351		
his amendment is submitted to amend the follow	ving:	
A. If amending name, enter the new name of t	he limited liability company here:	
The new name must be distinguishable and contain the wor	rds "Limited Liability Company." the designation "LLC" or t	the abbreviation "L.L.C."
Enter new principal offices address, if applical	ble:	<u></u>
Principal office address MUST BE A STREET	ADDRESS)	
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE B	<u> </u>	
		<u> </u>
B. If amending the registered agent and/or	r registered office address on our records, <u>er</u> ce address here:	nter the name of the
		P
Name of New Registered Agent:		PH 6: 30
New Registered Office Address:		· · · · · · · · · · · · · · · · · · ·
	Enter Florida street address	•
	Florid	aZip Code
	City	zarcoac

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, 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
AMBR	Jonathan Ackerman	1060 Wyandotte Trail Westfield, NJ 07090	Add
			Remove
			■ Change
		_	
			Remove
			Change
	•	_	Add
			□ Remove
			☐ Change
			Remove
			Change
	45-04	_	Add
			□ Remove
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Effective date, if other than the II an effective date is listed, the date mu	e date of filing:		(optional)	
If an effective date is listed, the date mu Note: If the date inserted in this b document's effective date on the I	lock does not meet the applica	able statutory filing requi	90 days after filing.) Pursuant to rements, this date will not be	605.0207 (3 listed as the
he record specifies a delaye The 90th day after the rec		t an effective time, a	at 12:01 a.m. on the ea	arlier of:
Dated November 15	. 2021	<u> </u>		
	isl Schwimmer Signature of a member or author			

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00