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COVER LETTER

TO:		istration Sec ision of Corp		,
SUBJE	CT.	1000 N RIV	'ERSIDÉ DR LLC	
50000			Name of Limited Liability Company	
			Amendment and fee(s) are submitted for filing. Indence concerning this matter to the following:	
			MENACHEM LIGHT	
			Name of Person	
			Firm/Company	
			636 MIDWOOD ST	
			Address	
			BROOKLYN NY 11225 11203	
			City/State and Zip Code MLIGHT18@GMAIL.COM	
			E-mail address: (to be used for future annual report notification)	
For furtl	her in	formation co	oncerning this matter, please call:	
	Λ	eva(Name of	Person at (716
Enclosed	d is a	check for the	e following amount:	
☐ \$25.	.00 Fi	ling Fee	Solutional copy is enclosed) \$30.00 Filing Fee & Certificate of Status Certificate of Status \$55.00 Filing Fee & Certificate of Status Certificate of Status	tatus &

Mailing Address:
Registration Section
Division of Corporations P.O. Box 6327

Street Address:
Registration Section
Division of Corporations The Centre of Tallahassee

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

1000 N RIVERSIDE DR LLC		
(<u>Name of the Limited Liability Comp</u> (A Florida Limited	any as it now appears on our records.) Liability Company)	
he Articles of Organization for this Limited Liability Company	y were filed on AUGUST 30,2021	and assigned
lorida document number L21000386974		
his amendment is submitted to amend the following:		
. If amending name, enter the new name of the limited liab	bility company here:	
he new name must be distinguishable and contain the words "Limited Liab	ility Company," the designation "LLC" or the a	obreviation "L.L.C."
nter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS)		
inter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
James Mill DE 711 OST OF FICE MON		
		
. If amending the registered agent and/or registered office gent and/or the new registered office address here:	address on our records, enter the nam	ne of the new regist
 		y 3
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florida	Zip Code
	City	Zip Code

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 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	MENACHEM M MINTZ	435 WEST MAIN ST ASPEN CO 81611 USA	■Add
			Remove
			□Change
			□Add
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			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
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			□Add
			□Remove
		***************************************	□Change
			□Add
			□Remove
			□ Change

Tective date, if other than the date of filing: (optional)		
an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 ote: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as occument's effective date on the Department of State's records. The specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the is filed. Signature of a member of authorized representative of a member.		
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