# 2/13/24, 3:45-xt 2000 4 Sixision of Corporations 5 4

#### Florida Department of State

H24000060935 3

## Division of Corporations Electronic Filing Cover Sheet

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(((H24000060935 3)))



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Division of Corporations

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Account Number : 120230000190
Phone : (844)449-3624
Fax Number : (844)449-3624

**Enter	the	email	address	for	this	busine	5.5	entity	to	be	used	for	future
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## LLC AMND/RESTATE/CORRECT OR M/MG RESIGNORIVERFLOW ENTERPRISES LLC

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Electronic Filing Menu

Corporate Filing Menu

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#### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

RiverFlow Enterprises LL	.c	·	
(Name of the Limited Liability Compa (A Florida Limited I.	ny as it now appear Liability Company)	s on our records.)	
The Articles of Organization for this Limited Liability Company	were filed on	10/25/2021	and assigned
Florida document number <u>1.21000463354</u> .			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabi	ility company he	<u>re</u> :	
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the de	esignation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:	8107 Red Jaspe	r Ln Apt 932 Delray Bea	क्षांकुम्भ्
(Principal office address MUST BE A STREET ADDRESS)			
			571 W F
	0107 D - J I	and a Amt 022 Doler	(A) -<
Enter new mailing address, if applicable:	8107 Red Just	r Ln Apt 932 Delray Beach, EP 33446	
(Mailing address MAY BE A POST OFFICE BOX)	· · · · · · · · · · · · · · · · · · ·		7 <b>5</b>
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our ro	ecords, <u>enter the na</u>	me of the new registered
Name of New Registered Agent:	-	-	
New Registered Office Address:	Enter Flor	ida street address	
		, Florida	
<del></del>	City		Zip Code
New Registered Agent's Signature, if changing Registered Agent:			
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as peing filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of provided for in C	my duties, and I an Thapter 605, F.S. O	n familiar with and r, if this document is

If Changing Registered Agent, Signature of New Registered Agent

H24000060935 3 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	Gerard Samuel		□ Add
			□Remove
		8107 Red Jasper Ln Apt 932 Delray I	Beach, FL 33446 <b>X</b> Change
			□Add
			Remove
			Change
			Remove
			Change
			□Add
			Remove
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Effecti	ve date, if other than the dective date is listed, the date must be	ate of filing:			(optional)	
lf an effe Note:	ective date is listed, the date must but the date inserted in this block	be specific and cannot be	be prior to date of t	iling or more than 9	0 days after filing.) Pur ments this date will	suant to 605,0207 ( not be listed as t
	ent's effective date on the Dep					
	d specifies a delayed effective	date, but not an effec	ctive time, at 12:	01 a.m. on the ea	rlier of: (b) The 90	th day after the
rd is file	ea.					
Datad	February 7th	202	24			
Dated_		·	·			
		0.0	20		<del>ber</del>	
	S	ignature of a member	think ed repr	esentative of a mem	ber	

Filing Fee: \$25.00