# LZZ 000411552

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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
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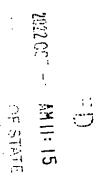
A. RIVERS

DEC 22 \_\_\_\_



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### **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: The RIVA Grap, L-C
Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Lois A. Peralta Name of Person
The Riva Group, LLC Firm/Company
1100 Brickell Bay Drive #310957
MIGMI FL 3 323 \ City/State and Zip Code
City/State and Zip Code  City/State and Zip Code  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Luis A. Perglta at (785)-543-3975
Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
□ \$25.00 Filing Fee □ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee,  Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)

Mailing Address:
Registration Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

The Articles of Organization for this Limited Liability Company were filed on Florida document number LZZ000 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: 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>	Name	Address	Type of Action
	·		□Add
			□Remove
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. If amei	ading any other information, enter change(s) here: (Attach additional sheets, if necessary.)
_	Need to KeMove Registered Agent
,	Need to ReMove Registered Agent Address: 1661 West Avenue #692
	MigMi Beach, FL 33239
_	
_	10. 1 Decision 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
1	NEW REGISTERICE FIGURES.
_	iew Kegistered Agent Address: 1100 Brickell Bay Drive Unit-310957
_	Miami FL, 33231
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ED MODEL AT	ve date, if other than the date of filing: 1013 202 (optional)  ctive 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 (3)
LH <b>ectiv</b> If an effe	tive date, if other than the date of filing: (optional) (optional) (ctive 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 (3)(
	f the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the nt's effective date on the Department of State's records.
do tume	in a checking date on the peparament of state a record.
e record rd is file	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 d.
Dated	10/03/ 2022
_	
	Signature of a member or authorized representative of a member
	Luis A. Peralta

Typed or printed name of signee