## L2300076745

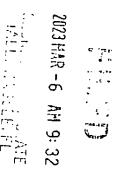
(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Common depicts
Special Instructions to Filing Officer:

Office Use Only



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09/09/23--01029--008 \*\*25.00



C/ 5/2/2023

## **COVER LETTER**

1.

TO: Registration Section

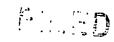
Tallahassee, FL 32314

, Division of Cor	porations			
Riverside	e Equities LLC			
SUBJECT:	Name of Lim	ited Liability Company		
The englosed Articles of	Amendment and fee(s) are sub	mitted for filing		
Please return all correspo	ondence concerning this matter	to the following:		
	Kathryn Stanley			
		Name of Person		
	Riverside Equities L	LC		
	****	Firm Company	<del></del>	
	2254 Riverside Aver	านอ		
		Address		
	Jacksonville, FL 322	204		
	KS@Riverside-EQ.co	City/State and Zip Code		
	E-mail address: (	to be used for future annual report not	ification)	
For further information c	oncerning this matter, please ca	all;		
Kathryn Stanley		904 289-1326	ס	
Name o	f Person	Area Code Daytin	ne Telephone Number	
Enclosed is a check for th				
☑ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	☐S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
Mailing Addres		Street Address:		
Registration S			Registration Section Division of Corporations	
Division of C P.O. Box 632		Division of Co The Centre of	•	
1 (4), 1303, 0.72	· •	1110 0/011110 0/1		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



2023 MAR - 6 AM 9: 32

Riverside Equities LLC	<u> </u>	O HU 3: 35
( <u>Name of the Limited Liability Company as it no</u> (A Florida Limited Liability C	ow appears on our records.) ompany)	ASSEC ATE
The Articles of Organization for this Limited Liability Company were file Florida document number		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liability con	ipauv here:	
The new name must be distinguishable and contain the words "Limited Liability Compa	any," the designation "LLC" of the abbreviation "I	LLC."
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)		<del></del>
B. If amending the registered agent and/or registered office address agent and/or the new registered office address here:	on our records, <u>enter the name of the ne</u>	w registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	<del>_</del> .
City	, Florida Zıp Code	,
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agree to acceptions of all statutes relative to the proper and complete perform accept the obligations of my position as registered agent as provided being filed to merely reflect a change in the registered office address	nance of my duties, and I am familiar w I for in Chapter 605, F.S. Or, if this doc	ith and rument is

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:

MCR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
MGR	Kathryn Stanley	7901 4th St N, Suite 300	
		St. Petersberg, FL 33702	Remove
			Change
			DAdd
			Remove
			Change
			□Add
			Remove
			Change
			🗀 Add
			Remove
			Change
			[□Add
			Remove
			Change
			[Add
			Remove

	2/28/2023
í I f an ei	tive date, if other than the date of filing:
Note: docur	If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as nent's effective date on the Department of State's records.
ne reco ord is f	rd 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 iled.
	1
	2/28 2023
Dated	
Dated	
Dated	Signature of a member or authorized representative of a member

Filing Fee: \$25.00