

L24000-138439

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

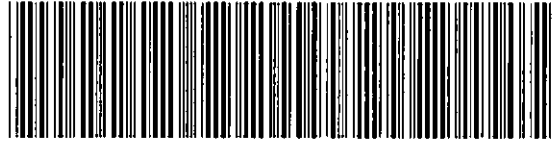
(Document Number)

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J. HORNE
OCT 16 2024

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10/02/24--01014--004 **60.00

2024 OCT -2 PM 1:20



September 23, 2024

Florida Department of State
Division of Corporations, The Center of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, Florida 32303

Subject: Rivel Group LLC – Document No. L240009138439
Filing of Amendment: Addition of New Member & Federal Employer
Identification Number 83-3384426

To Whom It May Concern:

Enclosed please find Articles of Amendment for Rivel Group LLC and check in the amount of Sixty Dollars (\$60.00) for filing fees.

Amendment is for the purpose of adding Mr. Richard J. Velez as an additional member of Rivel Group LLC as well as Rivel Group LLC's Federal Employer Identification Number.

Thank you for your assistance.

Sincerely,

A handwritten signature in black ink, appearing to read 'Ricardo Velez', is written over a circular line.

Ricardo Velez
Member

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Rivel Group LLC

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:

Ricardo Velez

Name of Person

Rivel Group LLC

Firm/Company

828 Sydney Street

Address

Davenport, Florida 33837

City/State and Zip Code

richvelezo@hotmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Ricardo Velez

Name of Person

at (646) 358-5183

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$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 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**

Rivel Group LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

FILED
2024 OCT 14 2 PM 1:20

The Articles of Organization for this Limited Liability Company were filed on 02/29/2024 and assigned
Florida document number 1.240009138439.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

N/A

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:

Enter Florida street address

Florida

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 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

[illegible]

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Also adding Federal Employer Identification # 83-3384426.

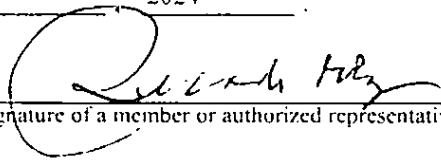
E. Effective date, if other than the date of filing: _____ **(optional)**

(If 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 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record 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 record is filed.

Dated September 23 2024



Signature of a member or authorized representative of a member

Ricardo Velez

Typed or printed name of signee

COVER LETTER

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Division of Corporations

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(A Florida Limited Liability Company)

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(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

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New Registered Office Address:

Enter Florida street address

_____, Florida _____
City Zip Code

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Signature of a member or authorized representative of a member

Ricardo Velez

Typed or printed name of signee