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SKORCZKAY ÓESTATE TALL'AHASSCE, FLORIDA

2012 DEC 28 AM 8: 30

JANUSBERRY JANOS 2012

## **COVER LETTER**

6		COVER LETTER		
TO: Registrat	tion Section		•	
, DIVISION	of Corporations			
SUBJECT:	Riverview Farms Name of Lin	of Havana, LLC	<del></del>	
The enclosed Artic	cles of Amendment and fee(s) are so	ubmitted for filing.		
Please return all co	orrespondence concerning this matte	er to the following:		
	Gei	Name of Person	tee	
		Name of Person		
		Firm/Company		
	32	18 Pablo Creek Way		
		·	₩. 2	
	Tal	lahassee Florida 3. City/State and Zip Code	2817 DEC 28 AM & 30	-11
			EC 2	TEB
	E-mail address:	(to be used for future annual report notifical	tion)	TIQ.
For further informa	ation concerning this matter, please	call:	下(0 <b>年</b>	Ö
Cours	ne I.D. i st	1 Cra. Hir ac	30 Ref	
N	Name of Person	<del>Lee</del> at ( <u>\$50</u> ) <u>445 - 88</u> Area Code & Daytime T	2.> elephone Number	
Enclosed is a check	k for the following amount:	•		
□ \$25.00 Filing F	Tee □\$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	

**MAILING ADDRESS:** 

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

## STREET/COURIER ADDRESS:

(additional copy is enclosed)

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Kiverview Farms of Have	ana, LLC
( <u>Name of the Limited Liability Company as</u> (A Florida Limited Liabili	it now appears on our records.) ty Company)
The Articles of Organization for this Limited Liability Company were Florida document number <u>L9900002073</u>	e filed on April 8, 1999 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability	company here:
Not Applicable  The new name must be distinguishable and end with the words "Limited Limited L	ALE INC.
The new name must be distinguishable and end with the words "Limited L"L.L.C."	28 7
Enter new principal offices address, if applicable:	Not Applicable 75
(Principal office address MUST BE A STREET ADDRESS)	Not Applicable The Total
Enter new mailing address, if applicable:	2210 Palla Cart War
(Mailing address MAY BE A POST OFFICE BOX)	3218 Pablo Creek Way Tallahassee, Florida 32312
munity munity many burning burning	rullariasse, Horiaa susta
B. If amending the registered agent and/or registered office a registered agent and/or the new registered office address here:	address on our records, enter the name of the new
Name of New Registered Agent: Not	Applicable
New Registered Office Address:	Applicable + Applicable
	Enter Florida street address
	, Florida
Cit	y Zip Code
New Registered Agent's Signature, if changing Registered Agent:	
I hereby accept the appointment as registered agent and agree to the provisions of all statutes relative to the proper and complete paccept the obligations of my position as registered agent as provibeing filed to merely reflect a change in the registered office addrompany has been notified in writing of this change.	performance of my duties, and I am familiar with and ded for in Chapter 608, F.S. Or, if this document is

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member

<b>Title</b>	<u>Name</u>	<u>Address</u>	Type of Action
M <u>GRM</u>	Dale S. Davidson	P.O. Box 187	Add
		Thomasville, Georgia 31799	Remove
MGRM	Genel Davidson, Trustee	3218 Pablo Creek Way	Add
	Trustee	3218 Pablo Creek Way Tallahassee Florida 3231	Remove
			Add
			Remove
···········			Remove  Remove  ALLAHASSET FINANCE  Remove
			Add
			Remove
<u></u>			Add
			Remove

Ifjamendi	ng any other information, enter change(s) here: (Attach additional sheets, if necessary.)
<del></del>	, .
 d	
u	Signature of a member or authorized representative of a member
	Gene L. Davidson Trustee
·	Typed or printed name of signee  Page 3 of 3

Filing Fee: \$25.00

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