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



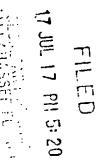
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S. TALLENT

JUL 20 2017

Mend



COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION	RIVMAN INITIATIV	VES AND CHARITIE	ES, INC.	
DOCUMENT NUMBER:	N16000006661			
The enclosed Articles of Am	endment and fee are subm	nitted for filing.		
Please return all corresponde		•		
CHARLES RIVMAN	_	-		
· · - <u></u>		(Name of Contact Per	son)	
RIVMAN INITIATIVES A	ND CHARITIES, INC.			
		(Firm/ Company)		
11050 SW 46TH STREET				
		(Address)		
MIAMI, FL 33165				
	((City/ State and Zip C	ode)	
RIVMANCHARITIES@GN	MAIL.COM			✓
E	-mail address: (to be used	for future annual repo	rt notification	1)
For further information conc	erning this matter, please of	call:		
CHARLES RIVMAN		at	305	205-7300
	(Name of Contact Person)		Area Code)	(Daytime Telephone Number)
Enclosed is a check for the f	ollowing amount made pay	vable to the Florida De	epartment of	State:
■ \$35 Filing Fce	□\$43.75 Filing Fee & I Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certif Certif	O Filing Fee icate of Status ied Copy tional Copy is osed)
Mailing A	ddress	Stre	et Address	

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

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

Articles of Amendment to Articles of Incorporation of

RΓ	VMA	N INITI	ATIVES	AND CHARITIES,	INC.
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(Name of Corporation	as currently filed w	rith the Florida Dept. of Si	tate)	
N16000006661				
(Document)	ment Number of Corp	oration (if known)	-	
Pursuant to the provisions of section 617.1006. Floamendment(s) to its Articles of Incorporation:	orida Statutes, this <i>Fla</i>	rida Not For Profit Corpo	ration adopts the following	lowing
A. If amending name, enter the new name of th	e corporation:			
			Th	ie new
name must be distinguishable and contain the word "Company" or "Co." may not be used in the nam		incorporated" or the abbre	viation "Corp." or '	"Inc."
B. Enter new principal office address, if application	able:			
(Principal office address <u>MUST BE A STREET</u> A			2	17
				
			<u></u>	- <u></u>
C. Enter new mailing address, if applicable:			のに、 カ った。	7
(Muiling address MAY BE A POST OFFICE	<u>BOX</u>)			
			<u> </u>	Çī
			1. d.	5; 20 ··
			`	
D. If amending the registered agent and/or regi		in Florida, enter the nam	ie of the	
new registered agent and/or the new register				
Name of New Registered Agent:	CHARLES RIVMA	.N		
	11050 SW 46TH ST	TREET		
V 5 . 100		(Florida street addres	55)	
New Registered Office Address:			221/6	
	MIAMI		Florida 33165	
	(City)		(Zip Code)	
New Registered Agent's Signature, if changing				
I hereby accept the appointment as registered ager	nt. – I am familiar with	i and accept the obligations	s of the position.	
		////		
-	Similar	Chil Basis and Asses if	oh amerimen	
	Signature	f few Registered Agent, if c	enanging	

Page 1 of 4

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change X Remove X Add	<u>V</u> <u>Mil</u>	in <u>Doe</u> ke Jones ly Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	СН/Г	CHARLES RIVMAN	11050 SW 46TH STREET
X Add			MIAMI, FL 33165
Remove			- -
2) Change	СН/Т	CARLOS RIVERO	III NE IST STREET
Add	-		SUITE 908
X Remove			MIAMI, FL 33132
3) X Change	T/VP/S	FLORA HABERKORN	11050 SW 46TH STREET
Add			MIAMI, FL 33165
Remove			
4) X Change	T/P	REBECCA RICCO	11050 SW 46TH STREET
Add			MIAMI, FL 33165
Remove			
5) Change	τ	MARIA C HERNANDEZ	111 NE 1ST STREET #908
Add			MIAMI, FL 33132
X Remove			
6) Change	T/S	DIANA RAVE	111 NE IST STREET #908
Add		-	MIAMI, FL 33132
X Remove			-

attach additional sheets, if necessary).	(Be specific)
· · · · · · · · · · · · · · · · · · ·	
<u>.</u>	
	
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<u></u>	

Effective date if applicable: (no more than 90 days after amendment file date)	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will no document's effective date on the Department of State's records.	ot be listed as the
Adoption of Amendment(s) (CHECK ONE)	
■ The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.	
☐ There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.	
Dated	
Signature (By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
(Typed or printed name of person signing)	
(Title of person signing)	