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R. WHITE

COVER LETTER

TO: Amendment Section Division of Corporation						
NAME OF CORPOR	ATION: <u>RIVERBE</u>	ND REALTY G	ORPORATION			
DOCUMENT NUMBI	er: <i> P010</i> 0000	8157	<u> </u>			
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.				
Please return all corresp	oondence concerning this mat	tter to the following:				
_	THERESA	SCHNE I'DER				
		Name of Contact Persor	1			
_	RIVERBENI	S REALTY C	PORPORATION			
Firm/ Company						
_	THERESA SCHNEIDER Name of Contact Person RIVERBEND REALTY CORPORATION Firm/Company 6 HARBOUR ISLE DR. EAST UNIT # 301 Address					
	Address					
	FT. PIERCE, FL 34949 City/ State and Zip Code					
City/ State and Zip Code						
TSCHNE 55 @ AOL. COM						
E-mail address: (to be used for future annual report notification)						
	concerning this matter, pleas					
THERESA	SCHNETOER	at (de & Daytime Telephone Number			
Name of	f Contact Person	Area Co	de & Daytime Telephone Number			
Enclosed is a check for	the following amount made	payable to the Florida Depa	urtment of State:			
\$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			
Maili	Mailing Address Street Address					
Amendment Section Amendment Section						
Division of Corporations		Division of Corporations				

P.O. Box 6327 Tallahassee, FL 32314 Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

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13 DEC 23 FH 3: FL RIVERBEND REALTY CORPORATION (Name of Corporation as currently filed with the Florida Dept. of State) P01000008157 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." 5092 SW 2444 AVE B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) FT. LAUDERDALE 333/2 5092 SW 2444 AVE C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) FT. LAUDERDALE D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: Florida (City)

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

New Registered Agent's Signature, if changing Registered Agent:

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	<u>PT</u> <u>John</u>	<u>Doe</u>	
X Remove	<u>V</u> <u>Mike</u>	Jones	
X Add	SV Sally	<u>Smith</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	TREASURER	REINHARD F. SCHNEIDER	301 SW 86 AVE
X Add			APT # 208
Remove			PEMBROOK PINES FL 3302
2) Change	SECRETARY	KATHERINE SCHNEIDER	5092 3W 244 AVE
Add			FT. LAUDERDALE, FL 333/2
Remove			-
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
6) Change			
Remove			

Attach additional sheets, if necessary).	cles, enter change(s) here: (Be specific)
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If an amendment provides for an exch	nange, reclassification, or cancellation of issued shares.
	understated in the company of the company of the life.
provisions for implementing the ame (if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
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provisions for implementing the ame (if not applicable, indicate N/A)	ndment if not contained in the amendment itself:

The date of each:amendment(s) adoption: date this document was signed.	, if other than the
Effective date if applicable: JAHUARY 1, 2014 (no more than 90 days after amendment file days)	
(no more than 90 days after amendment file da	ate)
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the aby the shareholders was/were sufficient for approval.	amendment(s)
The amendment(s) was/were approved by the shareholders through voting groups. The follow must be separately provided for each voting group entitled to vote separately on the amenda	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by" (voting group)	
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action an action was not required.	d shareholder
The amendment(s) was/were adopted by the incorporators without shareholder action and sha action was not required.	areholder
Dated 12/19/2013 Signature Thereso Schmider Pres.	
Signature Thereso Schmider Pres.	
(By a director, president or other officer – if directors or officers ha selected, by an incorporator – if in the hands of a receiver, trustee, appointed fiduciary by that fiduciary)	ve not been
THERESA SCHHELOCR (Typed or printed name of person signing	
(Typed or printed name of person signing)
PRESIDENT	
(Title of person signing)	