## P0400036631

(Requestor's Name)			
(Address)			
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(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MA	IL		
(Duning and Finkly Marrie)			
(Business Entity Name)			
(Document Number)			
Continue of Outro			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			
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ECRETARY OF STATE
LAHASSEE, FLORIDA

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## NewCo Corporate Services, Inc.

274 Madison Avenue, Suite 801 New York, New York 10016 Tele: 212-356-8340 Fax: 212-356-8379

email: carol@newcocorporate.com

March 20, 2013

Florida Department of State Div. of Corporations P.O. Box 6327 Tallahassee, Florida 32314

RE: River Hills By The River, Inc.

Dear Sir/Madam:

Enclosed is the change of agent for the above Florida domestic corporation,

together with our check for \$ 35.00 payabl to the state.

Please file and return a file-stamped copy to my attention.

Thank you.

Sincerely,

Carol Glospie

**Senior Corporate Specialist** 

cg/enc.

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	inge is submitted for a corporation	7.0502, 607.1508, or 617.1508, Florida Statutes, this organized under the laws of the State of Florida registered agent, or both, in the State of Florida.	-
1. The name of	the corporation: RIVER HILLS BY	THE RIVER, INC.	
2. The principal	office address: c/o Metalico, Inc., 18	36 North Avenue E, Cranford, NJ 07016	
3. The mailing ε	address (if different):		
4. Date of incorp	poration/qualification: February 24,	2004 Document number: PO4000036631	
5. The name and Florida Depart	d street address of the current regist rtment of State: (If resigned, enter r		
	Corporation Service Company	HAR SALE	77
	1201 Hays Street	RY C SEE	
	Tallahassee, Florida 32301	500	ロフ
6. The name and (if changed):	d street address of the new registere	ed agent (if changed) and /or registered office	_
	NRAI Services, Inc.		
	1200 South Pinc Island Road		
	P.O. B Plantation, FL 33324	ox NOT acceptable	
	Talitation, PL 33324		
The street address changed will	ess of its registered office and the be identical.	street address of the business office of its registered age	ent,
Such change was authorized by the	as authorized by resolution duly ache board, or the corporation has be	lopted by its board of directors or by an officer so een notified in writing of the change.	•
Maria	11 South	Amold S. Graber, Secretary	
Signatu	ire of an officer or director	Printed or typed name and title	-
I further agree performance of agent. Or, if th hereby confirm	to comply with the provisions of a my duties, and I am familiar with	ent and agree to act in this capacity. Il statutes relative to the proper and complete and accept the obligation of my position as registered to reflect a change in the registered office address, I ified in writing of this change.	
By:	and Ellerbue	March 20, 2013	
Sig	nature of Registered Agent	Date	_
If signing on be	chalf of an entity:		
Carol Glospie, A	ssistant Secretary		
T	yped or Printed Name		

\* \* \* FILING FEE: \$35.00 \* \* \*

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (03/12)