## P04000143537

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	γ/State/Zip/Phone	<b>⇒</b> #)
PICK-UP	<b></b> WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	ocument Number)	
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120 Change T. Lewis



## **COVER LETTER**

TO: Amendment Section Division of Corporations	
SUBJECT: RIVERSHINE INCORPORATION (Name of corporation)	
DOCUMENT NUMBER: 2	
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
ORHAN SEVIMOGLU (Name of contact person)	
RIVERSHINE, INC. (Furm/Company)	•
15821 NW 52ND AVE #205 (Address)	
HIALEAH, FL 33014	
(City/state and zip code)	
For further information concerning this matter, please call:	
ORHAN SEVIMOGLU at (788 ) 2876871  (Name of contact person) (Area code & daytime telephone number)	
(Name of contact person) (Area code & daytime telephone number)	
Enclosed is a \$35.00 check made payable to the Department of State.	
Mailing Address:  Amendment Section  Division of Corporations  P.O. Box 6327  Tollebosses FL 32314  Street Address:  Amendment Section  Division of Corporations  409 E. Gaines Street  Tollebosses FL 32314	

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

statement of chang	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes nge is submitted for a corporation organized under the laws of the State of FLORIC r to change its registered office or registered agent, or both, in the State of Florida.	DA	
The name of the	he corporation: RIVERSHINE, INC.		
7 The principal of	office address: 15821 NW 52ND AVE #205		
za 1110 pantospos O	HIALEAH, FL 33014		
3. The mailing add	ddress (if different): P.O. Box 868434		
	MIAMI, FL 33166		
4. Date of incorpo	poration/qualification: OCTOBER 18, 2004 Document number: PV 4000/45	537	
5. The name and s Florida Departn	street address of the current registered agent and registered office on file with the tment of State:		
_	Orhan Sevimoglu		
	4810 NW 79TH AVE #208	746 G	
•	MIAMI, FL 33166	看	<u> </u>
6. The name and s (if changed):	I street address of the new registered agent (if changed) and /or registered office	经 三	FILED
	Orhan Sevimoglu	MIN OU	
1	15821 NW 52ND AVE #205	(1) O	
·	(P.O. Box NOT acceptable)		
<u>}</u>	HIALEAH, FL 33014		
The street addres as changed will b	ess of its registered office and the street address of the business office of its regis be identical.	stered agent,	
Such change was authorized by the	as authorized by resolution duly adopted by its board of directors or by an office he board, or the comporation has been notified in writing of the change.	# 50	
Signature	ORHAN SEVIMOGLU, PRESIDENT (Printed of types name and time)		
I hereby accept the further agree to of my duties, and document is bein corporation has been accepted.	the appointment as registered agent and agree to act in this capacity, to comply with the provisions of all statutes relative to the proper and complete ad I am familiar with and accept the obligation of my position as registered ageing filed merely to reflect a change in the registered office address, I hereby const been notified in writing of this change.	performance it. Or, if this firm that the	
Rive	estine ac 3/6/2005 greature of Registered Agent) (Date)		
If signing on beh	shalf of an entity:		
Ochon	Soulmoelu Typed or Printed Name)		

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