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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	ORATION:		
DOCUMENT NUM	IBER: P04000161171		
	es of Amendment and fee are su	bmitted for filing.	
Please return all corr	respondence concerning this ma	tter to the following:	
	Julian Siegel		
		Name of Contact Person	1
	Riverside Market Inc		
		Firm/ Company	
	608 SW 12th Avenue		
		Address	
	Fort Lsauderdale FL 33312		
		City/ State and Zip Cod	e
	theriversidemarket@gmail.co	om	
	E-mail address: (to be us	sed for future annual report	notification)
For further informat	ion concerning this matter, plea		358-8333
Name	e of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check	for the following amount made		
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
A) Di P.	ailing Address mendment Section vision of Corporations O. Box 6327 illahassee, FL 32314	Ameno Divisio The C 2415 I	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as cu	urrently filed with the Florida Dept. of State)
P047000161171	The state of the s
(Document Nur	mber of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statute: its Articles of Incorporation:	es, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporati	<u>ion:</u>
	The new
name must be distinguishable and contain the word "corporatio "Inc.," or Co.," or the designation "Corp," "Inc," or "C "chartered," "professional association." or the abbreviation	on," "company," or "incorporated" or the abbreviation "Corp.," To". A professional corporation name must contain the word "P.A."
B. Enter new principal office address, if applicable:	
Principal office address <u>MUST BE A STREET ADDRESS</u>))
	1937
Enter new mailing address, if applicable:	0
(Mailing address MAY BE A POST OFFICE BOX)	
	5
D. If amending the registered agent and/or registered offic	oo address in Floridy, enter the name of the
new registered agent and/or the new registered office a	ddress:
Name of New Registered Agent	
Name of trew regimered Agent	
(Fig.	orida street address)
New Registered Office Address:	, Florida (City) (Zip Code)
New Registered Agent's Signature, if changing Registered	Agent:
hereby accept the appointment as registered agent. I am fan	miliar with and accept the obligations of the position.
Signature of	New Registered Agent, if changing
Check if applicable	
☐ The amendment(s) is/are being filed pursuant to s. 607.012	20 (11) (c), F.S.

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>	John Doe		
X Remove	\underline{V}	Mike Jones		
X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Na</u>	<u>me</u>	Address
1) Change	D	_ Lis	sa Siegel	822 SW Bryan Pice
Add				Fort Lauderdal FL 33312
Remove				
2) Change				
Add				
Remove Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		_ _		
Add				
Remove				

Attach additional sh	ling additional Art heets, if necessary).	(Be specific)			
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		L	tion or consultation	n afficulad charge	
<u>an amenument p</u> provisions for imi	olementing the am	nange, reclassifica endment if not cor	tion, or cancellation tained in the amen	dment itself:	
(if not applica	hle, indicate N/A)				
					
					
					<u></u> -
					
	·				
					<u> </u>

The date of each amendment(s) adoption:, if other than the
date this document was signed.
Effective date if applicable:
(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 not be listed as the document's effective date on the Department of State's records.
Adoption of Amendment(s) (CHECK ONE)
■ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):
"The number of votes cast for the amendment(s) was/were sufficient for approval
Julian Siegel
(voting group)
08/06/2021 Dated
Signature (By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
Julian Siegel
(Typed or printed name of person signing)
President
(Title of person signing)