Division of Corporations Electronic Filing Cover Sheet

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	Division of Co	porations	\$ > 2
	Fax Number	: (850)617-6381	
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From:			2
	Account Name	: LAZARUS CORPORATE FILING SERVICE, INC.	7
	Account Number	: I2 00000800 19	· 📆 :
	Phone	: (305)552-5973	(- (
	Fax Number	: (305)675-5944	읔:
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ann	nual report maili	ngs. Enter only one email address please.	
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FLORIDA PROFIT/NON PROFIT CORPORATION

RIVERSIDE INVESTMENT HOLDING COXP.

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Estimated Charge	\$78.75

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Electronic Filing Menu

Corporate Filing Menu

Help

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Principal street address SW 186TH AVE		Mailing address, if different is: 5931 NW 173 DR STE 9		
MAR , FL 3302	9	MIAMI, FL 33015		
CLE III PURP	DSE			
AND ALL LAW	the corporation is organized is:			
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Name	and Title:	No. 11 and The	•	
'ASING F	ing rive:	Name and Title:		
Addre		Address:		
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ARTICLE VI	REGISTERED AGENT			
		Box NOT acceptable) of the registered ager	nt is:	·
Name:	LUIS F ROSALES		Anna A	SIS 1
Address:	5931 NW 173 DR STE)		70
	MIAMI, FL 33015		n in the second	5 on 1
ADTIG: E Wet	INCORPOR 4 TOP		ئے۔ ران	PAL
ANTICLE VIL	INCORPORATOR		2	2년 -
The name and	address of the Incorporator is	•	÷	?
Name:	LUIS F ROSALES		•	
Address:	5931 NW 173 DR S	TE 9		
	МЛАМІ, FL 33015			
Effective date, (If an effective filing.) Note: If the da		t be specific and cannot be more than five	ve days prior or 91) days al	
Having been no this certificate.	nmed as registered agent to a I am familiar with and accep	occept service of process for the above state the appointment as registered agent and	ed corporation at the place agree to act in this capacity	designated in
	A CONTRACTOR OF THE PARTY OF TH	To the same of the	09/14/2017	
	Required Signatur	re/Registered Agent	Dat	ie
i submit this di document to th	ocument and affirm that the e Department of State constit	facts stated herein are true. I am aware a tutes a third degree felony as provided for it	that the false information s n s.817.155, F.S.	submitted in a
			09/14/2017	
Rea	uised Signature/Incorporator		D	alc