

P25000007818

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

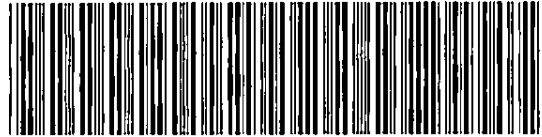
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000452012330

06/18/25--01017--018 **35.00

SECRET
TAMM COUNTY, FL

2025 JUN 18 AM 8:32

MeP

8-8-25

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: RIVER ROCK FACILITY INC.
DOCUMENT NUMBER: P25000007818

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

RSHEA SESLER

Name of Contact Person

Firm/ Company
6201 CHAPEL HILL BLVD #1613

Address
PLANO, TX. 75093

City/ State and Zip Code
SESLE91@YAHOO.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ANGELA TAYLOR-SESLE91 at (352) 424-4584

Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

- | | | | |
|---|---|--|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee & Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | <input type="checkbox"/> \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) |
|---|---|--|--|

Mailing Address
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address
Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

SECRET
NOT FOR RELEASE
DATE 06/18/05

2025 JUN 18 AM 8:32

RIVER ROCK FACILITY INC.

12500007818

☒ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), F.S.

2025 JUN 18 AM 8:32
SECURITY STATE
TALL 10-11-11

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:

☒ Change PT John Doe

☒ Remove V Mike Jones

☒ Add SV Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	PS	RSHEAL SESLER	6201 CHAPEL HILL BLVD #1613 PLANO, TX. 75093
2) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	VT	ANGELA TAYLOR-SESLER	37434 HOLIDAY CT DADE CITY, FL 33523
3) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove			
4) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove			
5) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove			
6) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove			

2025 JUN 18 AM 8:32
SECRETARY'S OFFICE
STATE OF FLORIDA

E. If amending or adding additional Articles, enter change(s) here:

(Attach additional sheets, if necessary). (Be specific)

CHANGE SHARES OFFERED OF 100,000,000 REDUCED TO 1,000,000 SHARES OFFERED

2025 JUN 18 AM 8:32
SECRETARY OF STATE
TALLAHASSEE, FL

F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:

(if not applicable, indicate N/A)

100,000,000 SHARES REDUCED TO 1,000,000

05/15/2025

The date of each amendment(s) adoption: _____, if other than the date this document was signed.

05/15/2025

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

by _____
(voting group)

05/15/2025

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)

R'SHEA L. SESLER

(Typed or printed name of person signing)

PRESIDENT, SECRETARY

(Title of person signing)

2025 JUN 18 AM 9:32
SECRETARY LATE
TALLAHASSEE, FL