P95000022018

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SECRETARY OF STATE
TALLAHASSEE, FLORID.

APPROVED ANO FILED

C. LEWIS
NOV 7 2013
EXAMINER

COVER LETTER

TO:	Amendment Section
	Division of Corporations

Division of Corporations					
NAME OF CORPORATION: RIVE ISLE REALTY, INC.					
DOCUMENT NUME	DOCUMENT NUMBER: P950000				
The enclosed Articles of Amendment and fee are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
	ROY A. PREM	ER			
Name of Contact Person RIVE ISLE REALTY, INC.			n		
2600 DOUGLAS RD., STE. 505			505		
CORAL GABLES, FL 33134					
City/ State and Zip Code			e		
RPREMER@RIVEISLE.COM					
	E-mail address: (to be us	sed for future annual report	notification)		
For further information concerning this matter, please call:					
ROY A. PR	EMER	at (786	, 239-4208		
Name o	of Contact Person		ode & Daytime Telephone Number		
Enclosed is a check for the following amount made payable to the Florida Department of State:					
□ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
<u>Mai</u>	ling Address	Street	Address		

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

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

APPROVED AND FILED

Articles of Amendment to Articles of Incorporation of

FILED

13 NOV -5 PH 2: 17

SECRETARY OF STATE TALLAHASSEE, FLORIDA

RIVE ISLE REALTY, INC.

				_
(Name of Corporation as curr	ently filed with the Flor	ida Dept. of State)		
P95000022018				_
(Document Nu	mber of Corporation (if k	nown)		
ursuant to the provisions of section 607.1006 Articles of Incorporation:	, Florida Statutes, this <i>Fla</i>	orida Profit Corporation ac	lopts the followin	g amendment
. If amending name, enter the new name o	of the corporation:			
RIVER WILDERNESS	REALTY, INC	D.		The new
ame must be distinguishable and contain to Corp.," "Inc.," or Co.," or the designation ord "chartered," "professional association,	"Corp," "Inc," or "Co	". A professional corpora		bbreviation
. Enter new principal office address, if ap Principal office address <u>MUST BE A STRE</u>				.
				-
Enter new mailing address, if applicable				_
(Mailing address MAY BE A POST OFF)	(CE BOX)	 		-
				~ •
		<u> </u>	<u>-</u>	: -
If amending the registered agent and/or new registered agent and/or the new reg		s in Florida, enter the nam	ne of the	
Name of New Registered Agent				
Name of New Registered Agent	(Florida street	address)		
Name of New Registered Agent New Registered Office Address:	(Florida street (City)	address)	(Zip Code)	

Signature of New Registered Agent, if changing

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	<u>V</u>	Mike Jones		
X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s	
1) Change	PD	ALEJANDRO A. DUENAS	2600 DOUGLAS ROAD	
Add			SUITE 1104	
Remove			CORAL GABLES,FL 33134	
2) Change	CFO	ROY A. PREMER	2600 DOUGLAS ROAD	
Add			SUITE 505	
Remove			CORAL GABLES,FL 33134	
3) Change	PD	WILLIAM G. VERNON	2600 DOUGLAS ROAD	
Add			SUITE 505	
Remove			CORAL GABLES,FL 33134	
4) Change	ST	JANE D. VERNON	2600 DOUGLAS ROAD	
Add			SUITE 505	
Remove			CORAL GABLES,FL 33134	
5) Change		_		
Add				
Remove			·	
6) Change				
Add				
Remove				

	if amending or adding additional Articles, enter change(s) here: Attach additional sheets, if necessary). (Be specific)
_	
_	
ľ	f 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)
	(if not applicable, indicate N/A)
-	(if not applicable, indicate N/A)
	(if not applicable, indicate N/A)



The date of each amendment	NOVEMBER 1, 2013	13 NOV -5 Pittorber/than th
date this document was signed		SECRETARY OF STATE TALLAHASSEE, FLORIDA
Effective date if applicable:	NOVEMBER 1, 2013	TALLAHASSEE, FLORIDA
	(no more than 90 days after amendm	ent file date)
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/webby the shareholders was/webby	re adopted by the shareholders. The number of votes casere sufficient for approval.	et for the amendment(s)
	re approved by the shareholders through voting groups. ed for each voting group entitled to vote separately on the	
"The number of votes	cast for the amendment(s) was/were sufficient for appro	oval
by	(voting group)	,, <u>, , , , , , , , , , , , , , , , , , </u>
	(voting group)	
The amendment(s) was/wer action was not required.	re adopted by the board of directors without shareholder	action and shareholder
The amendment(s) was/we action was not required.	re adopted by the incorporators without shareholder action	on and shareholder
Se	by a director, president or other officer – if directors or o elected, by an incorporator – if in the hands of a receiver, pointed fiduciary by that fiduciary)	
	ROY A. PREMER	
	(Typed or printed name of perso	n signing)
	CFO	
	(Title of person signing)	,