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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2015 JUN 26 PM 2:16

FILED

N. Cuffman

JUN 29 2015

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: FORTUNE SEVEN, LLC.

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing

Please return all correspondence concerning this matter to the following:

CARLOS MARRON

Name of Person

FORTUNE SEVEN, LLC.

Firm/Company

1000 BRICKELL AVENUE, SUITE: 640

Address

MIAMI, FLORIDA 33131

City/State and Zip Code

cemarron@gmail.com

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

For further information concerning this matter, please call:

CARLOS MARRON

Name of Person

305 904-0161

at ()

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

\$25.00 Filing Fee

\$30.00 Filing Fee &
Certificate of Status

\$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

\$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

MAILING ADDRESS:

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

STREET/COURIER ADDRESS:

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

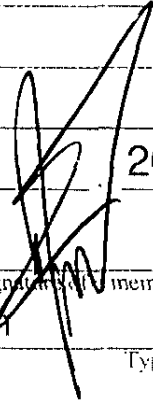
If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AR	ANAMARIA VELASQUEZ	1000 BRICKELL AVENUE, SUITE: 640	<input type="checkbox"/> Add
		MIAMI, FL 33131	<input checked="" type="checkbox"/> Remove
MGRM	BRBA INVESTMENTS, LLC.	1000 BRICKELL AVENUE, SUITE: 640	<input checked="" type="checkbox"/> Add
		MIAMI, FL 33131	<input type="checkbox"/> Remove
MGRM	MARALF GROUP, LLC.	1000 BRICKELL AVENUE, SUITE: 640	<input checked="" type="checkbox"/> Add
		MIAMI, FL 33131	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Dated June 12 2015


Signature of member or authorized representative of a member

Carlos Marron

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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