

**L1600024037635532**  
 Florida Department of State  
 Division of Corporations  
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To: Division of Corporations  
 Fax Number : (850) 617-6383

From: Account Name : ARTURO YERO P.A.  
 Account Number : I20150000125  
 Phone : (305) 444-0884  
 Fax Number : (305) 444-0786

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**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: arturoyero@ayeeolaw.com

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
 TURBANA LLC**

|                       |         |
|-----------------------|---------|
| Certificate of Status | 0       |
| Certified Copy        | 0       |
| Page Count            | 01      |
| Estimated Charge      | \$25.00 |

16 SEP 27 AM 10:21  
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 TALLAHASSEE, FLORIDA

D. SCOTT  
 SEP 28 2016

1160002403763

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TURBANA, LLC

(Name of the Limited Liability Company as it now appears on our records) (A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 02/19/2016 and assigned Florida document number 116000035532

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

7 Development Group, LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

Arturo Yero, P.A.

New Registered Office Address:

782 NW 42nd Avenue Suite 350

Enter Florida street address

Miami

City

Florida

33126

Zip Code

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If changing Registered Agent, Signature of New Registered Agent

SEP/27/2016/TUE 02:39 PM

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If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

| <u>Title</u> | <u>Name</u>           | <u>Address</u>            | <u>Type of Action</u>                      |
|--------------|-----------------------|---------------------------|--|
| MGR          | DIEGO GONZALEZ ROMANO | 1221 BRICKELL AVE STE 710 | <input checked="" type="checkbox"/> Add    |
|              |                       | MIAMI FL 33131            | <input type="checkbox"/> Remove            |
|              |                       |                           | <input type="checkbox"/> Change            |
|              |                       |                           | <input type="checkbox"/> Add               |
|              |                       |                           | <input type="checkbox"/> Remove            |
|              |                       |                           | <input type="checkbox"/> Change            |
|              |                       |                           | <input type="checkbox"/> Add               |
|              |                       |                           | <input type="checkbox"/> Remove            |
|              |                       |                           | <input type="checkbox"/> Change            |
|              |                       |                           | <input type="checkbox"/> Add               |
|              |                       |                           | <input checked="" type="checkbox"/> Remove |
|              |                       |                           | <input type="checkbox"/> Change            |
|              |                       |                           | <input type="checkbox"/> Add               |
|              |                       |                           | <input type="checkbox"/> Remove            |
|              |                       |                           | <input type="checkbox"/> Change            |

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P. 004

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

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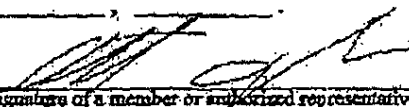
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E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)

If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing. Pursuant to 605.0237 (3)(b) 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.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:  
(b) The 90th day after the record is filed.

Dated September 22, 2016

  
 \_\_\_\_\_  
 Signature of a member or authorized representative of a member  
Alberto Aguayo  
 \_\_\_\_\_  
 Typed or printed name of signer