

2020 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L17000094262

Entity Name: THE M7 GROUP, LLC

Current Principal Place of Business:

14635 SUMMER ROSE WAY
FORT MYERS, FL 33919

Current Mailing Address:

14635 SUMMER ROSE WAY
FORT MYERS, FL 33919 US

FEI Number: APPLIED FOR

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

UNITED STATES CORPORATION AGENTS, INC.
5575 S. SEMORAN BLVD
SUITE 36
ORLANDO, FL 32822 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: CHEYENNE MOSELEY

11/20/2020

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title AMBR
Name BROOKS, CANTRELL L
Address 14635 SUMMER ROSE WAY
City-State-Zip: FORT MYERS FL 33919

Title AMBR
Name PITTS, JUAN R
Address 14635 SUMMER ROSE WAY
City-State-Zip: FORT MYERS FL 33919

Title AMBR
Name GANDY, RAPHEAL
Address 14635 SUMMER ROSE WAY
City-State-Zip: FORT MYERS FL 33919

Title AMBR
Name MALONE, AARON R
Address 14635 SUMMER ROSE WAY
City-State-Zip: FORT MYERS FL 33919

Title AMBR
Name MALONE, SHAWN R
Address 14635 SUMMER ROSE WAY
City-State-Zip: FORT MYERS FL 33919

Title AMBR
Name DAVIS JR., ROBERT G
Address 14635 SUMMER ROSE WAY
City-State-Zip: FORT MYERS FL 33919

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JUAN PITTS

AMBR

11/20/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date