L0600000 318H

(Requestor's Name)
(Address)
(Address)
(Addiess)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
<u> </u>

Office Use Only



500404412015

Ed. 17. 21 - Pipur - 115 - ##191.91



COVER LETTER

TO: Registration S Division of Co			
	MARKET, LLC		
SUBJECT:	Name of Lin	nited Liability Company	_
The enclosed Articles of	f Amendment and fee(s) are sub	omitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	HUMBERTO SPEZIANI		· ·
		Name of Person	<u> </u>
	7TH AVE MARKET, LL	С	ì
		Firm/Company	·
	1400 NW 10TH AVENUE	E 205P	
		Address	
	MIAMI, FLORIDA 33130	S	
		City/State and Zip Code	
	SEG153@MIAMI.EDU E-mail address:	(to be used for future annual report noti	lication)
For further information	concerning this matter, please o	·	
SUSAN GONZALEZ		305 243-3916 at ()	
Name (of Person	Area Code Daytim	c Telephone Number
Enclosed is a check for t	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 of C P.O. Box 632 Tallahassee,	Section Corporations 27	Street Address: Registration Second Division of Control The Centre of T 2415 N. Monroe Tallahassee, FL	porations allahassee Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

7TH AVE MARKET, LLC	
(Name of the Limited Liability Company as it now appears or (A Florida Limited Liability Company)	our records.)
he Articles of Organization for this Limited Liability Company were filed on 01/10/	2006 and assigned
lorida document number L06000003184	
his amendment is submitted to amend the following:	
. If amending name, enter the new name of the limited liability company here:	
	<u> </u>
ne new name must be distinguishable and contain the words "Limited Liability Company," the design	nation "LLC" or the abbreviation "L.L.C."
nter new principal offices address, if applicable:	
Principal office address MUST BE A STREET ADDRESS	
	3
	Ç. Ç.
nter new mailing address, if applicable:	<u> </u>
Mailing address MAY BE A POST OFFICE BOX)	1.
. If amending the registered agent and/or registered office address on our reco	rds, enter the name of the new registe
gent and/or the new registered office address here:	
Name of New Registered Agent:	
New Registered Office Address:	
Enter Florida	street address
	, Florida
City	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

AMBR = Authorized Member

<u> Fitle</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	RAFIC S. WARWAR	1400 NW 10TH AVENUE 205	P MIAMI, FL 33136 BAdd
			□ Pamove
			Remove
			Change

Page 2 of 3

							. 		
									
									
				,					
 -									
		-			•				
									
							·	<u></u>	
								<u> </u>	
					-		<u>:</u>		ζ,
							<u></u>		· ·
Note: If the	ate, if other than the da date is listed, the date must be e date inserted in this block effective date on the Depa	does not m	neet the appli	cable statutor	ng or more than 9 y filing require	(option 0 days after fil ments, this d	al) ing.) Pursuant ate will not b	to 605. De liste	0207 (d as tl
	specifies a delayed ei h day after the record		ate, but no	ot an effec	tive time, at	12:01 a.r	n. on the (earlie	r of:
	March 9		2023						
Dated	/ / /	/	<u> </u>						
Dated].[[].[
Dated	- Alexander Sig	nature of a n	 nember or auth	orized represe	mtative of a mem	ber		_	

Page 3 of 3

Filing Fee: \$25.00