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SECRETARY OF STATE DIVISION OF CORPORATION:

T. HAMPTON
APK 2 7 2009

EXAMINER

COVER LETTER

Division of Corp	porations		
SUBJECT. AV-7 IN	VESTMENTS, LLC		p.
SUBJECT: ///		ited Liability Company)	<u>, , , , , , , , , , , , , , , , , , , </u>
The enclosed Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspon	ndence concerning this matter	to the following:	
	Neil S. Schecht		
		(Name of Person)	
	Neil S. Schecht, P.A.		
		(Firm/Company)	
	3630 West Kennedy Blvd	I	
	-	(Address)	
	Tampa, FL 33609		
		(City/State and Zip Code)	
For further information co	oncerning this matter, please co	all:	
Neil S. Schecht		at (813) 353-9500	
(Name of Person)		(Area Code & Daytime T	elephone Number)
Enclosed is a check for the	e 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:

TO:

Registration Section

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

LAW OFFICES OF NEIL S. SCHECHT, P.A.

Neil S. Schecht

*ALSO ADMITTED IN ILLINOIS

3630 West Kennedy Boulevard Tampa, Florida 33609-2906 (813)-353-9500 FAX (813)-350-0300

April 21, 2009

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

RE: Amendment to AV-7 Investment, LLC

Dear Clerk,

Enclosed herein please find the completed Articles of Amendment and a check in the amount of \$25.00 for the above referenced LLC.

Should you have any questions or need any additional information, please do not hesitate to contact our office.

Very Truly Yours,

Courtney Sanchez

CAS/cas Enclosures

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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) B. If amending the registered agent and/or registered office address on our records, enter the	_ and as	
This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: N/A The new name must be distinguishable and end with the words "Limited Liability Company." the designation "LLC" 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) N/A N/A N/A B. If amending the registered agent and/or registered office address on our records, enter the		
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Name of New Registered Agent: N/A		
New Registered Office Address: N/A		
(Enter Florida street addre	2SS)	
, Florida		
(City)		de)

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 608, 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)

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 Type of Action Title **Address** Name MGRM Cord Vollmers 8509 Thrasher Court **■**✓ Add New Port Richey, FL 34654 Remove Mark Hepp MGRM □ 7 Add 3073 Woodsong Lane Clearwater, FL 33761 Remove 🗂 Add Remove ___ Add Remove ☐ Add Remove Add 🗂 Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) N/A 2009 Dated Signature df a member or authorized representative of a member Neil S. Schecht

Page 2 of 2

Filing Fee: \$25.00

Typed or printed name of signee