# L1000122976

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DIVISION OF GURP BRATTONS

T. HAMPTON
DEC 2 2 2010

EXAMINER

# **COVER LETTER**

ŤO:	Registration Sect Division of Corp				
SUBJECT: 7 Round Pond, LLC					
		Name of Limi	ted Liability Company		<del>-</del>
The er	nclosed Articles of A	mendment and fee(s) are sub	omitted for filing.		
Please	return all correspond	lence concerning this matter	to the following:		
			Brandon Sellari, CPA		
			Name of Person	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	Divine, Blalock, Martin & Sellari, LLC				
			Firm/Company		
420			Columbia Dr. Suite 1	10	
Address					-
		Wes	t Palm Beach, FL 334	409	
			City/State and Zip Code		<del>_</del>
		cs	ellari@dbmscpa.com	1	
		E-mau address: (1	to be used for future annual rep	ort notification)	
For fu	rther information con	cerning this matter, please c	क्षी:		
		n Sellari, CPA	at (561)	686-	:
	Name of F	erson	Area Code &	Daytime Telepi	none Number
Enclos	sed is a check for the	following amount:			
<b>√</b> \$2:	5.00 Filing Pee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is e	nclosed)	]\$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



### FLORIDA DEPARTMENT OF STATE Division of Corporations

### RECEIVED

10 DEC 21 PM 4:00

SECRETARY OF STATE TALLAHASSEE, FLORIDA

December 13, 2010

BRANSON SELLARI, CPA DIVINE BLALOCK MARTIN & SELLARI LLC 420 COLUMBIA DR - ST 110 W PLAM BEACH, FL 33409

SUBJECT: 7 ROUND POND LLC Ref. Number: L10000122976

We have received your document for 7 ROUND POND LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6855.

Tammy Hampton Regulatory Specialist II

Letter Number: 410A00028745

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

FILLE SECRETARY OF STATE 10 DEC 21 AM 10: 20

	it now appears on our records.) y Company)
The Articles of Organization for this Limited Liability Company were Florida document numberL10000122976	filed on November 30, 2010 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability c	ompany here:
The new name must be distinguishable and end with the words "Limited Lie"L.L.C."	ability Company," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	drivia A. Ciasulli
(Principal office address MUST BE A STREET ADDRESS) 13	3210 Avila Beach Cove
$\overline{\mathcal{D}}$	dricia A. Ciasulli 3270 Avila Beach Cove elray Beach, Fl. 33446
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered office acceptant and/or the new registered office address here:	idress on our records, enter the name of the new
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
City	, Florida

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 <u>Title</u> **Address Type of Action Name** ☐ Add ☐ Remove □Add Remove ∏Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated Signature of a member or authorized representative of a member Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00