## LIIDOOOUSUS

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				

Special Instructions to Filing Officer:

L. SELLERS

AUG 1 6 2011

**EXAMINER** 

Office Use Only



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SECULARY OF STATE

## A.

## **COVER LETTER**

TO: Registration Section
Division of Corporations

SUBJECT:	G7 Sc	olutions, LLC			
	Name of Limited Liability Company				
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.			
Please return all correspo	ndence concerning this matter	to the following:			
			•		
	Jason E Walker				
		Name of Person			
				_	
	Firm/Company				
	6112 Westgate Drive #202				
	Address				
	Orlando, Florida 32835				
	City/State and Zip Code				
	Jasonewalker@gmail.com  E-mail address: (to be used for future annual report notification)				
	·	•	i notification)		
For further information co	oncerning this matter, please c	all:			
Jas	on E Walker	at ( 352 )	239-2375		
Name of Person Area Code & Daytime Telephone Number				ır.	
Enclosed is a check for th	e following amount:				
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enc	closed) Certifie	ate of Status &	

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

G7 Solutions, I	LC
(Name of the Limited Liability Company as it (A Florida Limited Liability	now appears on our records.) Company)
The Articles of Organization for this Limited Liability Company were fill Florida document numberL11000061843	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability co	mpany here:
Palisade Security,	LLC
The new name must be distinguishable and end with the words "Limited Liab "L.L.C."	pility Company," the designation "LLC" or the abbreviation
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 ad registered agent and/or the new registered office address here:	dress on our records, enter the name of the new
Name of New Registered Agent:	The sale of the sa
New Registered Office Address:	The state of the s
City	Enter Florida street address \( \times \) \(
New Registered Agent's Signature, if changing Registered Agent:	DRIE 32

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 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> <u>Name</u> Address **Type of Action** ☐ Add Remove ☐ Add Remove ☐ Add Remove Add Remove ∏Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) August 8 2011 Dated\_

> Jason E Walker Typed or printed name of signee

Signature of a member or authorized representative of a member

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Filing Fee: \$25.00