L12000137903

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EXAMINER



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11/19/12--01008--003 **25.00



COVER LETTER

TO:

Registration Section
Division of Corporations

SUBJECT:

MJH Seventh Street, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:



Name of Person

Marc Julien Homes, LLC

Firm/Company

175 SE 1st Avenue

Addres

Delray Beach, FL 33444

City/State and Zip Code

mjulien@marcjulienhomes.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Mitchell B. Kirschner, Esq.

561,347-0000

Name of Person

Area Code & Daytime Telephone Number

Enclosed is a check for 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)

12 MOV 19 PH 3: 35

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**

ARTICLES	S OF ORGANIZATION	
	OF	Pro to
MJH Seventh Street, LLC		
(<u>Name of the Limited Liabilit</u>	y Company as it now appears on Limited Liability Company)	our records.
(71 Fortuna	Difficed Elability Company)	
The Articles of Organization for this Limited Liability	Company were filed on October	er 30, 2012 and assigned
Florida document number L12000137903	:	P
This amendment is submitted to amend the following: A. If amending name, enter the new name of the line	nited liability company here:	
The new name must be distinguishable and end with the wo "L.L.C."	ords "Limited Liability Company,"	the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADD	RESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
	<u> </u>	
B. If amending the registered agent and/or registered agent and/or the new registered office add	stered office address on our dress here:	records, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter F	lorida 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 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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager

MGRM = Managing Member **Type of Action** <u>Name</u> <u>Address</u> Title 175 SE 1st Avenue **GUIDO VIRGILI MGRM** Delray Beach, FL 33444 Remove Remove

Remove

f amending any o	ther information, enter change(s) here: (Attach additional sheets, if necessary.)
Novembe	16 2012
Marc .	Signature of a member or authorized representative of a member
	Typed or printed name of signee

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Filing Fee: \$25.00