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COVER LETTER

TO:

Registration Section
Division of Corporations

SUBJECT:

127 SE 7TH AVENUE 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:

Keith D. Pisani

Name of Person

127 SE 7th Avenue LLC

Firm/Company

1438 3rd Avenue, Apt. 24E

Addres

New York, NY 10028-1979

City/State and Zip Code

keithpisani@yahoo.com

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

For further information concerning this matter, please call:

Keith D. Pisani

_{at} 212, 729-8552

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)

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

127 SE 7TH AVENUE LLC			-	
(A Florida Lin	ompany as it now appears on our records.) nited Liability Company)			
The Articles of Organization for this Limited Liability Com	pany were filed on January 28, 2013	and a	assigned	
Florida document number <u>L13000014006</u>				
This amendment is submitted to amend the following:				
A. If amending name, <u>enter the new name of the limited</u>	liability company here:			
The new name must be distinguishable and end with the words "Limited	d Liability Company," the designation "LLC" or the	abbreviation	ı "L.L.C."	
Enter new principal offices address, if applicable:		i i		
(Principal office address MUST BE A STREET ADDRES	<u></u>	<u> </u>	5	
			<u></u>	1
		, , , , , , , , , , , , , , , , , , ,	<u> </u>	1.
Enter new mailing address, if applicable:	1438 3rd Avenue, Apt. 24E		2 ¥. • •	``
(Mailing address MAY BE A POST OFFICE BOX)	New York, NY 10028-1979	#.} -	€D	
				
B. If amending the registered agent and/or register		the nam	e of the	e n o
registered agent and/or the new registered office address	s here:			
Name of New Registered Agent:				
New Registered Office Address:				
	Enter Florida street address			
	City	Zip Cod	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 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

If amending the Managers or Authorized Member on our records, <u>enter the title, name, and address of each Manager or Authorized Member being added or removed from our records</u>:

MGR = Ma $AMBR = Au$	anager uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add
		.	Remove
			□ Remove
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D. If amending any other information, enter c	hange(s) here: (Attach additional sheets	, if necessary.)	
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E. Effective date, if other than the date of filin (The effective date must be specific, cannot be prior to de	g:		(optional)	
(The effective date must be specific, cannot be prior to de the date this document is filed by the Florida Departme	ate of receipt or filed and of State)	date and cannot be more than	90 days after	
Dated July 30	2014			
Kutt V	,			
	member or authorize	ed representative of a membe	r	
Keith D. Pisani			±	623 C'3
	Typed or printed n	ame of signee	T	Tn-
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Page 3 of 3

Filing Fee: \$25.00