

L14000175042

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H14000281344 3)))



H140002813443ABC.

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.
Account Number : I20000000019
Phone : (305)552-5973
Fax Number : (305)675-5944

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
MANAGEMENT SEVEN LLC**

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

14 DEC -5 AM 10:00

J. Shivers OCT. 18 2014

RECEIVED

14 DEC -5 AM 10:00

DIVISION OF CORPORATIONS
ELECTRONIC FILING
COMMERCIAL
REGISTRATION SERVICES

H14000281344

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

MANAGEMENT SEVEN LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 11/19/2014 and assigned
Florida document number L14000179042

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" or the abbreviation "LLC."

Enter new principal offices address, if applicable:

N/A

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

N/A

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

ROGER RAMOS

New Registered Office Address:

535 LA VILLA DRIVE

Enter Florida street address

MIAMI SPRINGS

Florida

City

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

H14000281344

H14000281344

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

MGR = Manager
 AMBR = Authorized Member

Title	Name	Address	Type of Action
MGR	SANCHEZ, LAZARO	535 LA VILLA DRIVE	☐ Add
		MIAMI SPRINGS, FL 33166	☒ Remove
AMBR	ROGER RAMOS	535 LA VILLA DRIVE	☒ Add
		MIAMI SPRINGS, FL 33166	☐ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA
 14 DEC - 5 AM 10:00
 FILED

H14000281344

H14000281344

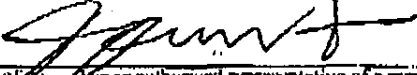
D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

N/A

F. Effective date, if other than the date of filing: _____ (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated DECEMBER 4TH 2014


Signature of a member or authorized representative of a member

ROGER RAMOS
Typed or printed name of signer

Page 3 of 3
Filing Fee: \$25.00

14 DEC -5 AM 10:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

H14000281344