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.

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : ACCOUNT BOOKKEEPING CORP

Account Number : I20120000055 : (407)898-1757 : (407)897-5336 Fax Number

\*\*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

### 7X CONSTRUCTION LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00



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#### **COVER LETTER**

TO: Registration So Division of Col			
SUBJECT:	7X CONST	RUCTION LLC	
	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fcc(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
		RAFAELA MARTINS	
		Name of Person	
	, ACC	COUNT BOOKKEEPING CORP	
		Firm/Company	
	330	0 S. HIAWASSEE RD. STE 106	
	***************************************	Address	
		ORLANDO/ FL 32835	
		City/State and Zip Code	······································
		NFO@ABKCORP.COM	
	E-mail address: (	to be used for future annual report noti-	ficution)
For further information of	oncerning this matter, please co	all;	
RAFAELA MARTINS		407 898-1757 at (	
Name o	f Person	Area Code Daytim	e Telephone Number
Enclosed is a check for t	ne 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, Cortificate 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

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From Account Bookkeeping 1.321.888.4914 Thu Nov 17 09:12:18 2016 MST Page 3 of 5

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

UCTION LLC				
any as it now appears on our records.) Liability Company)				
y were filed on09/02/2015	and assigned			
bility company here:				
ility Company," the designation "LLC" or the	abbreviation "L.L.C."			
1071 S HIAWASSEE RD APT 1235				
ORLANDO, FL 32835	L 32835			
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ORLANDO, FL 32835	N SSEA			
office address on our records, <u>ente</u> re:	S 2 117			
Enter Florida street address	<u> </u>			
, Florida _				
City	Zip Code			
	Dility Company   09/02/2015  were filed on   09/02/2015  were filed on   09/02/2015  bility company here:  iiity Company," the designation "LLC" or the   1071 S HIAWASSEE RD APT 1235  ORLANDO, FL 32835  ORLANDO, FL 32835  ORLANDO, FL 32835  office address on our records, entere:  Enter Florida street address			

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

Page 1 of 3

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If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	<u>Address</u>	Type of Action
MGR	DOS SANTOS, ERIKA R	6410 Metrowest Blvd Apt 1110	<b>a</b> Add
		Orlando, Fl. 32835	☐ Remove
	•		
<u></u>	***************************************		□ Add
			□ Remove
			☐ Change
MGR	ROGERIO CIMINO, MARCOS	6410 Metrowest Blvd Apt 1110	□ Add
		Orlando, FL 32835	Remove  O Coope  And Coope
			Remove Change
•			Add
			☐ Change
			Remove
			☐ Change

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Page 3 of 3