# 1.16000038651

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	· #)
PICK-UP	☐ WAIT	MAIL
(Ви	siness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	Certificates	of Status
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2016 MAR - 4 PM 3: 25

K.SALY EXMANNER MAR - 7

# **COVER LETTER**

Division of Corp	ction porations		
SUBJECT:	SEVEN T	WO INVESTMENT LLC	
	Name of Lim	ited Liability Company	
The enclosed Articles of /	Amendment and fec(s) are sub	omitted for filing.	
Please return all correspor	idence concerning this matter	to the following:	
	OSV	/ALDO MARTINEZ	
		Name of Person	
	O&J PROFI	ESSIONAL SERVICES INC	
		Firm/Company	
	7	82 NW 42 AVE STE 433	
		Address	
		MIAMI FL 33126	
		City/State and Zip Code	
		OOEMARTINEZ@AOL.COM	<del></del>
		to be used for future annual report notifi	(cation)
For further information co	ncerning this matter, please e	all:	
OSVALDO MAR	TINEZ	305 446-4006 at ( )	
Name of	Person	Area Code Daytime	Telephone Number
Enclosed is a check for the	c 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

2016 MAR - 4 PM 3:25

#### SEVEN TWO INVESTMENT 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 Florida document numberL16000038651	Company were filed on	02/24/2016	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the lin	nited liability company ho	e <u>re</u> :	
The new name must be distinguishable and contain the words "Li	mited Liability Company," the d	lesignation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADD	ORESS)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or regregistered agent and/or the new registered office ad-		our records, <u>ente</u>	r the name of the n
Name of New Registered Agent:			
New Registered Office Address:	Enter Flor	rida street address	
	Сіђу	Florida	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 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 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>	<u>Name</u>	Address	Type of Action
MGR	ELIANE RABONI DE MORALES	1724 CORPORATE DR	□ Λὐὐ
		BOYNTON BEACH FL 33426	Remove
			☐ Change
MGR	ADILSON PENA DE MORALES	1724 CORPORATE DR	
		BOYNTON BEACH FL 33426	■ Remove
			☐ Change
MGR	ELIANE RABONI DE MORAES	1724 CORPORATE DR	<b></b>
		BOYNTON BEACH FL 33426	□ Remove
		-	Change
MGR	ADILSON PENA DE MORAES	1724 CORPORATE DR	<b>-</b> Add
		BOYNTON BEACH FL 33426	☐ Remove
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effective date is listed, the date must be specific as If the date inserted in this block does no	and cannot be prior to date of filing of meet the applicable statutory	or more than 90 days after f filing requirements, this	iling.) Pursuant to 605.020 date will not be listed a:
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ecord specifies a delayed effective	a data, but not an official	ive time at 12:01 a	m, on the earlier o
ee 90th day after the record is file	d.	ive time, at 12.01 a.	in. on the earner o
d			
Alli Ism	Pero- De Mo	Laly	
Signature of	a member or authorized represen	tative of a member	

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Filing Fee: \$25.00