## 4600137483

(Red	questor's Name)	<u>.                                    </u>
(Add	dress)	
(Add	dress)	
(Cit)	//State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bus	siness Entity Nan	ne)
(Doc	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to F	Filing Officer:	
		:

Office Use Only



900435950749

09/06/24--01014--013 \*\*30.00

FILL S ALIO: 55

09/cle/20

## **COVER LETTER**

TO:

Tallahassee, FL 32314

TO: Registration Se Division of Cor			
ARM 7 LD			
SUBJECT:		ited Liability Company	<del></del>
The enclosed Articles of	Amendment and fee(s) are sub	Name of Person  Firm/Company  y Rd.  City/State and Zip Code gmail.com iii address: (to be used for future annual report notification)  er, please call:  727	
Please return all correspo	indence concerning this matter	to the following:	
	Alan Manieri		
	· · · · · · · · · · · · · · · · · · ·	Name of Person	
	ARM 7 LLC		
		Firm/Company	
	1034 Chinaberry Rd.		
	· · · · · · · · · · · · · · · · · · ·	Address	<del></del>
	Clearwater, FL 33764		
		City/State and Zip Code	
	thalytamanieri@gmail.com		
	E-mail address: (	to be used for future annual report no	otification)
For further information e	oncerning this matter, please ca	all:	
Thalyta Manieri		727 450-9032	
Name o	f Person	at () Area Code Dayti	me Telephone Number
England is a shoot for t	ha Callandina amanat		
Enclosed is a check for the	_		
□ \$25.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	Certified Copy	Certificate of Status & Certified Copy
M 100 - 2.13		0	
Mailing Address Registration 3			Section
Division of C	Corporations	Division of C	orporations
P.O. Box 632	27	The Centre of	`Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ARM 7 LLC	
(Name of the Limited Liability Company as it now a (A Florida Limited Liability Comp	<u>ppears on our records.</u> ) any)
The Articles of Organization for this Limited Liability Company were filed of Clorida document number	n 07/21/2016 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability compar	ny here:
The new name must be distinguishable and contain the words "Limited Liability Company,"	the designation "L.I.C" or the abbreviation "IL.C."
Enter new principal offices address, if applicable:	<u></u>
Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable:	SSS →
Mailing address MAY BE A POST OFFICE BOX	E.S. 10.
	7/E 55
B. If amending the registered agent and/or registered office address on orgent and/or the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:	our records, enter the name of the new regi
City	, Florida

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
AMBR	Alan Manieri	1034 Chinaberry Rd. Clearwater, FL 33764	
			□Remove
			Change
AMBR	Thalyta Manieri	1034 Chinaberry Rd. Clearwater, FL 33764	
			□Remove
			Change
			□ Add
		5.44 5.44 5.44 5.44 5.44 5.44 5.44 5.44	; ; ;
		EE. FILE	O O Add
			□Remove
			Change
			🗆 Add
			□Remove
			🗀 Change
			🗆 Add
			□Remove
			Change

Alan and Thalyta Manieri are MEMBERS (please remove the titles lis	sted as PRESIDENT and VP that	s on their
names.		
	·	
	<del>- · · · · · · · · · · · · · · · · · · ·</del>	
<del></del>		)
		3 10 1
	** *** * ***	. 2 L
	1888.	<del>→</del>
	- HES	<u>₩</u> 1.
	TAIE	 ហ
	1.1	<del></del>
07/21/2016 tive date, if other than the date of filing:	(optional)	
tive date, if other than the date of filing:  Tective date is listed, the date must be specific and cannot be prior to date of filir.  If the date inserted in this block does not meet the applicable statutor.	ng or more than 90 days after filing.)	Pursuant to 60:
nent's effective date on the Department of State's records.	y timig requirements, this date w	in not be us
rd specifies a delayed effective date, but not an effective time, at 12:01 fled.	a.m. on the earlier of: (b) The	90th day afte
nea.		
AUGUS1 29 2024		
AUGUST 29 2024  LUGUST M  Signature of a member or authorized representations of the second s		

Filing Fee: \$25.00