TO:18506176383 FROM:5615448999

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2/24/2017

Division of Corporations



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.

(((H17000053472 3)))



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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : PADULA BENNARDO LEVINE, LLP

Account Number : I20160000051

: (561)544-8900

Fax Number

: (561)544-8999

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

Email	Address.	Cb@pb1-1	a.w.	Con

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN 7TH AVENUE MODERN, LLC

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COVER LETTER

TO:	Registration Sc Division of Cor				
SUBJE		Modern, LLC			,
SOBOL	×*1	Name of Lim	ired Liability Company		
The encl	losed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please re	eturn all correspo	ndence concerning this matter	to the following:		
		Cristofer A. Bennardo			
			Name of Person		-
		Padula Bennardo Levine, L	LP		
			Firm/Company		-
		101 Plaza Real South, Suite	e 207		
		***************************************	Address		•
		Boca Raton, FL 33432			
		cb@pbl-law.com	City/State and Zip Code		
			to be used for future annual re	port notification)	
For furth	ner information c	oncerning this matter, please ca	all:		
Cristofe	r A. Bennardo		561 544- at ()	8900	
**************************************	Name o	f Person	Area Code	Daytime Telephone Number	
Enclosed	d is a check for th	ne following amount:			27 日
■ \$2 5.	00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclo	Certifica osed) Certified	ling Fee.
	MAIL	ING ADDRESS:	STREET/	COURIER ADDRESS:	

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle Tallahassee, FL 32301

02/24/2017

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

7th Avenue Modern, LLC		
(Name of the Limited Liability (A Florida	y Company as it now appears on our records.) Limited Liability Company)	
The Articles of Organization for this Limited Liability Co Florida document number L17000040950	ompany were filed on 02/21/2017	and assigned
	 '	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ted liability company here:	
The new name must be distinguishable and contain the words "Limit	ted Liability Company," the designation "LLC" or the abl	previation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDR	(ESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		

B. If amending the registered agent and/or regist registered agent and/or the new registered office addr	tered office address on our records, <u>enter</u>	the name of the ne
		置るコ
Name of New Registered Agent:		第2元
New Registered Office Address:	Enter Florida street address	四条 是 口
		1000 H
***************************************	, Florida	Zin 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

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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>	<u>Name</u>	Address Address	Type of Action
AMBR	Scott Porton	138 N. Swinton Avenue	Add
		Delray Beach, FL 33444	■ Remove
			□ Change
AMBR	Scott Porten	138 N. Swinton Avenue	Add
		Delray Beach, FL 33444	□ Remov c
			☐ Change
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			Remove
			□ Change
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			2 Change
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			□ Add
			□ Remove
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D. If am	ending any other info	(((H17000 rmation, enter change(s) here	053472 3))) : (Attach additional sheets, if necess	ary.)
				
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Note:	If the date inserted in th	is block does not meet the applica	o date of filing or more than 90 days after filible statutory filing requirements, this days	al) ng.) Pursuant to 605.0207 ate will not be listed as
If the rea	ond enecifies a dela	aved effective date, but not	an effective time, at 12:01 a.n	on-the ea rli er of
(b) The	90th day after the	record is filed.	an enecuve ame, at 12.01. am	Fo
Dated	February 24	2017	,	音号 6
Dateu		100	·	27 M
	(Signature of a member or author	ized representative of a member	
	Alajarda	/ Authorized Mamber		7: 3

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Typed or printed name of signee

Filing Fee: \$25.00